



State of Wisconsin  
**Department of  
Health and Family Services**

# 2005-2007 Biennial Budget Request

September 15, 2004

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State of Wisconsin  
**Department of Health and Family Services**

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Jim Doyle, Governor  
Helene Nelson, Secretary

September 15, 2004

The Honorable Jim Doyle  
Governor, State of Wisconsin  
115 East, State Capitol  
Madison, WI 53702

Dear Governor Doyle:

The 2005-2007 biennial budget request of the Department of Health and Family Services implements your budget priorities and follows your budget guidelines:

- Invest in the health and safety of children, implementing your KidsFirst agenda.
- Preserve the health care safety net including Medical Assistance, BadgerCare and SeniorCare serving low income children and families, people with disabilities and elderly people.
- Hold the line on net state General Purpose Revenue (GPR) funds with a net zero GPR increase except for legal entitlement programs and other specified exemptions.

In your KidsFirst plan last spring, you unveiled a comprehensive set of proposals to invest in children so they can grow up safe, healthy and successful in strong families. I am especially pleased that, even in these toughest of budget times, we have been able to reallocate funds for your KidsFirst priorities. We can initiate a universal home visiting program for first-time parents. We can strengthen our foster care and adoption system to provide safe homes for children who have been abused and neglected, provide better mental health and substance abuse treatment for families and children at risk, and make other changes to strengthen the State's and Milwaukee's child welfare service system. We can improve oral and physical health care for children and youth. We can help female offenders return to their families and communities with supports they need to succeed as parents and citizens, breaking the cycle of incarceration. As you have frequently said, these are vitally important investments in Wisconsin's future.

We have been able to enhance services to children and families through allocating GPR from two sources. First, the state Bureau of Milwaukee Child Welfare has reduced the need to remove children from their homes by over 40% since January 2002, by providing in-home safety services and making progress in promptly finding permanent and safe solutions for children. The difference between the currently budgeted caseload costs for out-of-home placements and our actual caseload experience is reinvested in 2005-07 to further improve outcomes for children in Milwaukee and around the State, including an increase in reimbursement rates for foster families. No current services will be reduced for children or their parents as a result of this reinvestment. Second, we have adjusted the federal funding budgeted for the Bureau to be more closely aligned with the activities that generate those federal dollars. Without reducing the total budget available to the Bureau, GPR funding is freed up that is used to improve children welfare practice, policy and program performance in Milwaukee and statewide.

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I am also pleased that this budget continues to maintain eligibility and benefits for health care to our neediest citizens. The largest programs in the Department and the largest components of the Department's biennial budget request are the three Medical Assistance (MA) programs: Medicaid, SeniorCare, and BadgerCare. Wisconsin, under your leadership, has successfully preserved the health care safety net while taking a wide variety of measures to control costs and claim all legally available federal funds to offset state costs.

That having been said, together we face a daunting challenge to continue to find ways to provide and pay for the health care that people need -- at a cost that state taxpayers can afford. Per the budget instructions, our request projects the "cost to continue" of the health care entitlement programs under current law. Then, we propose decision items to reduce the State GPR impact -- without modifying eligibility or basic benefits.

Overall, before taking account of any new policy, revenue enhancement, or cost containment measures, the Department's three MA programs, Medicaid, SeniorCare, and BadgerCare, are projected to grow in enrollment by 3.7% and in total (all funds) expenditures by 2.0% in FY 06 and in the following year, FY07, to grow in enrollment by 3.4% and in total expenditures by 6.6%. This compares very favorably to broader market trends for health care costs, including commercial health care and Medicare, for example, although the MA figures do not include provider rate increases.

Nonetheless, even these increases are extremely challenging and place very significant pressure on the state's GPR resources. While total expenditures are rising at rates that compare favorably with broader market indicators, the rate of increase in GPR expenditures is considerably higher -- a total of about \$708 million in the biennium. This is primarily attributable to structural deficits in the Medicaid program due to revised (reduced) federal revenue cost-shares and the higher-than-planned caseload base from the current biennium. We will continue to work hard with all interested parties to solve these problems in the current biennium, and find permanent solutions for the recurring problems in 2005-2007.

The Department has been pursuing numerous cost containment strategies in the current biennium to help control the cost increases in the Medicaid program. This 2005-07 budget proposal includes a number of new cost saving and revenue maximization initiatives. In the aggregate these new proposals are projected to generate approximately \$90 million of GPR savings in the Medicaid programs, which will help offset the large GPR cost-to-continue. Department staff are working diligently with our colleagues in the State Budget Office and your staff on other possible cost containment and revenue maximization measures for consideration in your budget. In addition to doing whatever we can here at the State level, we will continue to advocate strongly for more adequate federal cost-sharing for health care for needy children and families, elderly people, and people with disabilities.

I have enclosed a chart that summarizes the key financial and program features of this Department budget request. Because of state fiscal constraints, the budget includes few other initiatives beyond KidsFirst priorities and entitlement programs providing affordable health care for needy populations.

Besides the increased cost of health care entitlement programs, we are budgeting other caseload-driven and court-ordered population changes in several programs, per the budget instructions. Notably, this includes a substantial increase in the need for adoption assistance, due to programmatic success in placing record numbers of special needs children in permanent adoptive homes.

Also included are population changes at our state institutions. Most financially significant, we forecast increasing costs for forensic mental health populations at all mental health institutions, including but not limited to persons committed under Chapter 980. These cost trends remind us of the need to prevent child abuse and neglect, and provide earlier treatment and support to people with mental illness and substance abuse issues where that can prevent the need for institutional care or corrections costs. I appreciate your leadership in helping the State secure significant federal funding specifically for substance abuse treatment. I will continue to work to advance this priority in collaboration with Corrections Secretary Frank and others.

This budget also completes the planned down-sizing of long-term care at Northern Wisconsin Center, which is well underway based on decisions in the last budget and a recent court decision affirming the State's authority to proceed under law. As a byproduct of this action, the budget shows a net reduction in the number of state employees in our Department. This submission does not make new policies or initiatives to further reduce Department staff. We have already developed added proposals to reduce State operations and employment, which per your instructions will be included within a fuller package we are developing for submission November 15.

As we work with you to develop your budget proposals to the Legislature, I look forward to augmenting the proposals we have been able to make in this Department budget request. I especially appreciate your interest in developing long-term care reforms that will meet the needs of our aging population and people with disabilities in ways that better respond to their preferences and, at the same time, manage state taxpayer costs. At your direction, the Department is working closely with your Office and the state budget staff in exploring options that you may consider later this year.

Finally, I want to express appreciation for the strong human services partnership between the state, counties and tribes. Similar to the State, counties and tribes are facing significant fiscal pressures. To the extent possible within the State's tight financial constraints, the Department's budget seeks to provide fiscal relief and increased flexibility to counties and tribes, in areas such as Income Maintenance funding and AODA/Intoxicated Drivers funding. We will continue to work with our partners to find ways to solve problems and serve people better within available resources.

I look forward to discussing the Department's budget request in more detail with you and working with you on the development of the state's 2005-07 biennial budget.

Sincerely,

A handwritten signature in black ink, appearing to read "Helene Nelson". The signature is fluid and cursive, with the first name "Helene" written in a larger, more prominent script than the last name "Nelson".

Helene Nelson  
Secretary

# SUMMARY: 2005-2007 GPR Budget of the Department of Health and Family Services

(\$ in Millions)

	<u>FY06</u>	<u>FY07</u>	<u>Biennium</u>
<b>Children and Family-related Items</b>			
Family Foundations: Universal Home Visiting (DIN 5106)	\$0.53	\$2.20	\$2.73
Uniform Foster Care Rate Increase (DIN 5304)	\$0.82	\$1.64	\$2.46
Child Welfare System and Service Improvements (DIN 5303, 5620)	\$1.83	\$2.31	\$4.14
Health Care Improvements (DIN 512-5104)	\$0.20	\$0.19	\$0.39
Female Offender Re-Integration Program (DIN 5623)	\$0.12	\$0.16	\$0.28
<i>Milwaukee Child Welfare Reestimate (DIN 5302)</i>			
Use of Federal IV-E Funds	-\$1.76	-\$1.70	-\$3.46
Actual Caseloads below budgeted level	-\$3.36	-\$3.37	-\$6.73
<b>Subtotal: Children and Family-related Items</b>	<b>-\$1.62</b>	<b>\$1.43</b>	<b>-\$0.19</b>
<b>Health Care</b>			
<i>MA Base Reestimate (not subject to GPR target (DIN 5400))</i>			
Adjusted Base for FY05 estimated caseload and utilization	\$104.77	\$104.76	\$209.53
Adjusted Base for decreased FED revenue maximization	\$62.90	\$68.90	\$131.80
Revised federal matching rate for Wisconsin MA Program	\$22.24	\$40.03	\$62.27
Projected caseload increases in 05-07	\$38.38	\$72.98	\$111.36
Projected prescription drug and other utilization increases	\$24.79	\$104.09	\$128.88
<i>BadgerCare Reestimate (not subject to GPR target) (DIN 5401)</i>			
Projected surplus related to FY05 caseload and utilization	-\$4.98	-\$4.97	-\$9.95
Projected caseload and utilization increases in 05-07	\$2.73	\$12.20	\$14.93
Federal budget neutrality penalty based on 1999-2004 experience	\$0.00	\$11.00	\$11.00
<i>SeniorCare Reestimate (not subject to GPR target) (DIN 5402)</i>			
Adjusted base for FY05 Experience	\$10.34	\$10.34	\$20.68
Projected caseload and utilization increases in 05-07	\$9.27	\$18.09	\$27.36
Medical Assistance Services for Children in RCCs (DIN 5461)	-\$23.42	-\$23.42	-\$46.84
Other Policy and Savings Measures and MA Admin. (see Table 2)	-\$13.22	-\$25.78	-\$39.00
<b>Subtotal: Health Care</b>	<b>\$233.80</b>	<b>\$388.22</b>	<b>\$622.02</b>
<b>Other Entitlement and Court-Ordered Programs</b>			
<i>(Not subject to GPR targets)</i>			
State Foster Care and Adoption Assistance Reestimate (DIN 5306)	\$5.56	\$10.36	\$15.92
State Institutions: Population Reestimates (DIN 5200, 5201)	\$2.72	\$4.22	\$6.94
<b>Other Items (DINS 5303,5404,5604)</b>	<b>-\$0.46</b>	<b>-\$0.28</b>	<b>-\$0.74</b>
<b>Transfers to Other Agencies (DINS 5101,5608,5622)</b>	<b>-\$0.18</b>	<b>-\$0.18</b>	<b>-\$0.36</b>
<b>Standard Budget Items (DINS 3000-4999)</b>	<b>\$6.41</b>	<b>\$7.61</b>	<b>\$14.02</b>
<i>(DINS 3000-3999 not subject to GPR targets)</i>			
<b>TOTAL DEPARTMENT GPR REQUEST</b>	<b>\$246.23</b>	<b>\$411.38</b>	<b>\$657.61</b>

**SUMMARY: 2005-2007 GPR Budget of the Department of Health and Family Services**

(\$ in Millions)

	<u>FY06</u>	<u>FY07</u>	<u>Biennium</u>
<b>Table 2</b>			
<b>MA POLICY AND SAVINGS MEASURES AND ADMINISTRATION</b>			
MA Coverage for Youths Leaving Out of Home (DIN 5421)	\$0.37	\$1.09	\$1.46
Prenatal Care for Non-qualified Immigrant Women (DIN 5422)	-\$0.30	-\$0.41	-\$0.71
Life Lease (DIN 5603)	-\$0.25	-\$0.71	-\$0.96
Community Opportunities and Recovery Waiver (DIN 5621)	-\$0.03	-\$0.16	-\$0.19
Milwaukee County Mental Health Complex Funding (DIN 5607)	-\$0.78	-\$0.73	-\$1.51
Expansion of SSI Managed Care (DIN 5420)	-\$1.35	-\$3.96	-\$5.31
Managed Care for Low-Income Families (DIN 5470)	-\$1.45	-\$1.33	-\$2.78
Medical Assistance Purchase Plan Premium Change (DIN 5462)	-\$0.04	-\$0.09	-\$0.13
Eliminate Physician Prescription Requirements for MH Services (DIN 5463)	\$0.00	\$0.00	\$0.00
Estate Recovery for PACE and Partnership Programs (DIN 5464)	-\$0.01	-\$0.06	-\$0.07
Spousal Support for Individuals Receiving Long Term Care Services (DIN 5465)	-\$0.09	-\$0.53	-\$0.62
HIRSP Eligibility of Individuals receiving Limited MA Benefits (DIN 5441)	\$0.00	\$0.00	\$0.00
Changing the Medicaid "Grace Month" Policy (DIN 5460)	-\$1.27	-\$1.52	-\$2.79
Eligibility Quality Assurance (DIN 5410)	-\$1.47	-\$5.66	-\$7.13
Transportation Broker (DIN 5411)	-\$0.02	-\$2.52	-\$2.54
MA Contracts Reestimate (DIN 5403)	\$3.30	\$4.82	\$8.12
Medicaid, BadgerCare and SeniorCare Pharmacy Reimbursement (DIN 5404)	-\$7.27	-\$10.56	-\$17.83
Emergency Room Utilization (DIN 5412)	-\$0.30	-\$0.30	-\$0.60
Third Party Liability (DIN 5467)	-\$1.46	-\$1.53	-\$2.99
Medicaid Fraud Prevention (DIN 5469)	-\$0.80	-\$1.62	-\$2.42
<b>SubTotal</b>	<b>-\$13.22</b>	<b>-\$25.78</b>	<b>-\$39.00</b>

**B 7****BY PROGRAM****435 Health and Family Services**

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Program: 01 DPH (Ops)

<u>SOURCE OF FUNDS</u>	<u>Annual Summary</u>				<u>Biennial Summary</u>			
	<u>Prior Yr Actual</u>	<u>Adjusted Base Year</u>	<u>Agency Request 1st Year</u>	<u>2nd Year</u>	<u>Base Year Doubled (BYD)</u>	<u>Biennial Request</u>	<u>\$ Change From BYD</u>	<u>% Change From BYD</u>
<b>General Purpose Revenue</b>								
a) Total		4,572,500	5,374,800	5,374,800	9,145,000	10,749,600	1,604,600	17.5%
b) State Operations		4,572,500	5,374,800	5,374,800	9,145,000	10,749,600	1,604,600	17.5%
e) Position FTE		41.58	53.45	53.45				
<b>Federal Revenue</b>								
a) Total	29,459,200	28,679,000	29,661,700	30,027,100	57,358,000	59,688,800	2,330,800	4.1%
b) State Operations	29,459,200	28,679,000	29,661,700	30,027,100	57,358,000	59,688,800	2,330,800	4.1%
e) Position FTE		262.35	253.44	252.44				
<b>Program Revenue</b>								
a) Total	5,897,900	7,136,000	10,608,100	10,934,600	14,272,000	21,542,700	7,270,700	50.9%
b) State Operations	5,897,900	7,136,000	10,608,100	10,934,600	14,272,000	21,542,700	7,270,700	50.9%
e) Position FTE		82.65	108.18	108.18				
<b>Program Revenue Service</b>								
a) Total	1,616,900	3,631,600	2,438,000	2,432,000	7,263,200	4,870,000	(2,393,200)	-32.9%
b) State Operations	1,616,900	3,631,600	2,438,000	2,432,000	7,263,200	4,870,000	(2,393,200)	-32.9%
e) Position FTE		20.00	33.06	33.06				
<b>Segregated Revenue</b>								
a) Total	395,100	305,000	287,500	287,300	610,000	574,800	(35,200)	-5.8%
b) State Operations	395,100	305,000	287,500	287,300	610,000	574,800	(35,200)	-5.8%
e) Position FTE		2.57	2.00	2.00				
<b>Total</b>								
a) Total	37,369,100	44,324,100	48,370,100	49,055,800	88,648,200	97,425,900	8,777,700	9.9%
b) State Operations	37,369,100	44,324,100	48,370,100	49,055,800	88,648,200	97,425,900	8,777,700	9.9%
e) Position FTE		409.15	450.13	449.13				

**B 7****BY PROGRAM****435 Health and Family Services**

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Program: 02 DDES (Institutes)

<u>SOURCE OF FUNDS</u>	<u>Annual Summary</u>				<u>Biennial Summary</u>			
	<u>Prior Yr Actual</u>	<u>Adjusted Base Year</u>	<u>Agency Request 1st Year</u>	<u>2nd Year</u>	<u>Base Year Doubled (BYD)</u>	<u>Biennial Request</u>	<u>\$ Change From BYD</u>	<u>% Change From BYD</u>
<b>General Purpose Revenue</b>								
a) Total		133,592,300	141,445,100	144,145,800	267,184,600	285,590,900	18,406,300	6.9%
b) State Operations		125,734,900	135,368,700	137,484,400	251,469,800	272,853,100	21,383,300	8.5%
c) Local Assistance		7,857,400	6,076,400	6,661,400	15,714,800	12,737,800	(2,977,000)	-18.9%
e) Position FTE		1,571.73	1,653.35	1,653.35				
<b>Program Revenue</b>								
a) Total	173,732,800	163,138,300	157,629,700	159,119,800	326,276,600	316,749,500	(9,527,100)	-2.9%
b) State Operations	173,732,800	163,138,300	157,629,700	159,119,800	326,276,600	316,749,500	(9,527,100)	-2.9%
e) Position FTE		2,386.87	2,219.50	2,219.50				
<b>Program Revenue Service</b>								
a) Total	5,684,300	4,647,700	6,952,300	6,940,800	9,295,400	13,893,100	4,597,700	49.5%
b) State Operations	5,684,300	4,647,700	6,952,300	6,940,800	9,295,400	13,893,100	4,597,700	49.5%
e) Position FTE		77.60	71.10	71.10				
<b>Total</b>								
a) Total	179,417,100	301,378,300	306,027,100	310,206,400	602,756,600	616,233,500	13,476,900	2.2%
b) State Operations	179,417,100	293,520,900	299,950,700	303,545,000	587,041,800	603,495,700	16,453,900	2.8%
c) Local Assistance		7,857,400	6,076,400	6,661,400	15,714,800	12,737,800	(2,977,000)	-18.9%
e) Position FTE		4,036.20	3,943.95	3,943.95				



**B 7****BY PROGRAM****435 Health and Family Services**

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**Program: 03 DCFS**

<b>SOURCE OF FUNDS</b>	<b>Annual Summary</b>				<b>Biennial Summary</b>			
	<b>Prior Yr Actual</b>	<b>Adjusted Base Year</b>	<b>Agency Request 1st Year</b>	<b>2nd Year</b>	<b>Base Year Doubled (BYD)</b>	<b>Biennial Request</b>	<b>\$ Change From BYD</b>	<b>% Change From BYD</b>
<b>General Purpose Revenue</b>								
a) Total		107,232,100	108,320,900	113,102,100	214,464,200	221,423,000	6,958,800	3.2%
b) State Operations		20,539,200	17,587,000	17,092,400	41,078,400	34,679,400	(6,399,000)	-15.6%
c) Local Assistance		1,542,900	547,200	547,200	3,085,800	1,094,400	(1,991,400)	-64.5%
d) Aids to Ind. & Org.		85,150,000	90,186,700	95,462,500	170,300,000	185,649,200	15,349,200	9.0%
e) Position FTE		154.61	138.87	138.87				
<b>Federal Revenue</b>								
a) Total	114,540,200	98,242,900	100,133,400	104,693,800	196,485,800	204,827,200	8,341,400	4.2%
b) State Operations	32,411,600	18,454,800	15,719,000	15,747,000	36,909,600	31,466,000	(5,443,600)	-14.7%
c) Local Assistance	12,798,800	13,374,800	10,796,800	10,796,800	26,749,600	21,593,600	(5,156,000)	-19.3%
d) Aids to Ind. & Org.	69,329,800	66,413,300	73,617,600	78,150,000	132,826,600	151,767,600	18,941,000	14.3%
e) Position FTE		99.83	114.57	114.57				
<b>Program Revenue</b>								
a) Total	3,080,300	5,667,400	5,404,700	5,144,100	11,334,800	10,548,800	(786,000)	-6.9%
b) State Operations	1,051,800	890,700	911,300	911,300	1,781,400	1,822,600	41,200	2.3%
c) Local Assistance	1,279,200	1,478,200	1,314,000	1,045,000	2,956,400	2,359,000	(597,400)	-20.2%
d) Aids to Ind. & Org.	749,400	3,298,500	3,179,400	3,187,800	6,597,000	6,367,200	(229,800)	-3.5%
e) Position FTE		13.29	13.29	13.29				
<b>Program Revenue Service</b>								
a) Total	61,600,800	66,174,300	64,411,400	64,643,600	132,348,600	129,055,000	(3,293,600)	-2.5%
b) State Operations	14,465,600	17,027,500	16,584,800	16,817,000	34,055,000	33,401,800	(653,200)	-1.9%
c) Local Assistance	22,883,500	23,931,600	23,513,400	23,513,400	47,863,200	47,026,800	(836,400)	-1.7%
d) Aids to Ind. & Org.	24,251,700	25,215,200	24,313,200	24,313,200	50,430,400	48,626,400	(1,804,000)	-3.6%
e) Position FTE		69.86	68.86	68.86				
<b>Total</b>								
a) Total	179,221,300	277,316,700	278,270,400	287,583,600	554,633,400	565,854,000	11,220,600	2.0%
b) State Operations	47,929,000	56,912,200	50,802,100	50,567,700	113,824,400	101,369,800	(12,454,600)	-10.9%
c) Local Assistance	36,961,400	40,327,500	36,171,400	35,902,400	80,655,000	72,073,800	(8,581,200)	-10.6%
d) Aids to Ind. & Org.	94,330,900	180,077,000	191,296,900	201,113,500	360,154,000	392,410,400	32,256,400	9.0%
e) Position FTE		337.59	335.59	335.59				

**B 7****BY PROGRAM****435 Health and Family Services**

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Program: 04 DHCF

SOURCE OF FUNDS	Annual Summary				Biennial Summary			
	Prior Yr Actual	Adjusted Base Year	Agency Request 1st Year	2nd Year	Base Year Doubled (BYD)	Biennial Request	\$ Change From BYD	% Change From BYD
<b>General Purpose Revenue</b>								
a) Total		1,630,940,300	1,865,158,000	2,020,474,100	3,261,880,600	3,885,632,100	623,751,500	19.1%
b) State Operations		45,905,700	49,752,300	51,062,700	91,811,400	100,815,000	9,003,600	9.8%
c) Local Assistance		37,276,600	33,623,000	35,087,600	74,553,200	68,710,600	(5,842,600)	-7.8%
d) Aids to Ind. & Org.		1,547,758,000	1,781,782,700	1,934,323,800	3,095,516,000	3,716,106,500	620,590,500	20.0%
e) Position FTE		123.63	108.46	108.46				
<b>Federal Revenue</b>								
a) Total	3,186,249,600	2,844,392,100	2,820,575,700	2,956,979,300	5,688,784,200	5,777,555,000	88,770,800	1.6%
b) State Operations	98,605,300	94,315,700	120,633,400	119,001,400	188,631,400	239,634,800	51,003,400	27.0%
c) Local Assistance	51,297,700	49,444,500	55,001,200	57,386,700	98,889,000	112,387,900	13,498,900	13.7%
d) Aids to Ind. & Org.	3,036,346,600	2,700,631,900	2,644,941,100	2,780,591,200	5,401,263,800	5,425,532,300	24,268,500	0.4%
e) Position FTE		412.41	399.60	399.60				
<b>Program Revenue</b>								
a) Total	70,033,900	83,449,300	79,998,000	86,429,300	166,898,600	166,427,300	(471,300)	-0.3%
b) State Operations	9,336,400	10,384,200	6,021,100	6,277,200	20,768,400	12,298,300	(8,470,100)	-40.8%
d) Aids to Ind. & Org.	60,697,500	73,065,100	73,976,900	80,152,100	146,130,200	154,129,000	7,998,800	5.5%
e) Position FTE		50.81	11.70	11.70				
<b>Program Revenue Service</b>								
a) Total	6,173,100	5,158,900	6,055,000	6,097,200	10,317,800	12,152,200	1,834,400	17.8%
b) State Operations	2,359,600	2,671,300	2,648,900	2,649,200	5,342,600	5,298,100	(44,500)	-0.8%
c) Local Assistance	1,515,300	1,186,100	1,387,800	1,382,400	2,372,200	2,770,200	398,000	16.8%
d) Aids to Ind. & Org.	2,298,200	1,301,500	2,018,300	2,065,600	2,603,000	4,083,900	1,480,900	56.9%
e) Position FTE		10.18	8.47	8.47				
<b>Segregated Revenue</b>								
a) Total	936,988,400	296,013,900	256,940,800	281,327,500	592,027,800	538,268,300	(53,759,500)	-9.1%
b) State Operations	5,529,200	5,041,400	6,821,900	7,076,600	10,082,800	13,898,500	3,815,700	37.8%
d) Aids to Ind. & Org.	931,459,200	290,972,500	250,118,900	274,250,900	581,945,000	524,369,800	(57,575,200)	-9.9%
e) Position FTE		4.83	4.83	4.83				

**B 7****BY PROGRAM****435 Health and Family Services**

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Program: 04 DHCF

<u>SOURCE OF FUNDS</u>	<u>Annual Summary</u>				<u>Biennial Summary</u>			
	<u>Prior Yr Actual</u>	<u>Adjusted Base Year</u>	<u>Agency Request 1st Year</u>	<u>2nd Year</u>	<u>Base Year Doubled (BYD)</u>	<u>Biennial Request</u>	<u>\$ Change From BYD</u>	<u>% Change From BYD</u>
<b>Total</b>								
a) Total	4,199,445,000	4,859,954,500	5,028,727,500	5,351,307,400	9,719,909,000	10,380,034,900	660,125,900	6.8%
b) State Operations	115,830,500	158,318,300	185,877,600	186,067,100	316,636,600	371,944,700	55,308,100	17.5%
c) Local Assistance	52,813,000	87,907,200	90,012,000	93,856,700	175,814,400	183,868,700	8,054,300	4.6%
d) Aids to Ind. & Org.	4,030,801,500	4,613,729,000	4,752,837,900	5,071,383,600	9,227,458,000	9,824,221,500	596,763,500	6.5%
e) Position FTE		601.86	533.06	533.06				

**B 7****BY PROGRAM****435 Health and Family Services**

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Program: 05 DPH (Aids/LA)

<u>SOURCE OF FUNDS</u>	<u>Annual Summary</u>				<u>Biennial Summary</u>			
	<u>Prior Yr Actual</u>	<u>Adjusted Base Year</u>	<u>Agency Request 1st Year</u>	<u>2nd Year</u>	<u>Base Year Doubled (BYD)</u>	<u>Biennial Request</u>	<u>\$ Change From BYD</u>	<u>% Change From BYD</u>
<b>General Purpose Revenue</b>								
a) Total		29,974,000	31,966,900	33,631,500	59,948,000	65,598,400	5,650,400	9.4%
c) Local Assistance		3,499,600	5,026,400	6,691,000	6,999,200	11,717,400	4,718,200	67.4%
d) Aids to Ind. & Org.		26,474,400	26,940,500	26,940,500	52,948,800	53,881,000	932,200	1.8%
e) Position FTE								
<b>Federal Revenue</b>								
a) Total	102,877,400	98,345,100	108,069,400	107,528,400	196,690,200	215,597,800	18,907,600	9.6%
d) Aids to Ind. & Org.	102,877,400	98,345,100	108,069,400	107,528,400	196,690,200	215,597,800	18,907,600	9.6%
e) Position FTE								
<b>Program Revenue</b>								
a) Total	1,939,100	1,929,300	5,033,300	4,957,700	3,858,600	9,991,000	6,132,400	158.9%
d) Aids to Ind. & Org.	1,939,100	1,929,300	5,033,300	4,957,700	3,858,600	9,991,000	6,132,400	158.9%
e) Position FTE								
<b>Program Revenue Service</b>								
a) Total	4,536,000	9,670,000	476,600	462,700	19,340,000	939,300	(18,400,700)	-95.1%
d) Aids to Ind. & Org.	4,536,000	9,670,000	476,600	462,700	19,340,000	939,300	(18,400,700)	-95.1%
e) Position FTE								
<b>Total</b>								
a) Total	109,352,500	139,918,400	145,546,200	146,580,300	279,836,800	292,126,500	12,289,700	4.4%
c) Local Assistance		3,499,600	5,026,400	6,691,000	6,999,200	11,717,400	4,718,200	67.4%
d) Aids to Ind. & Org.	109,352,500	136,418,800	140,519,800	139,889,300	272,837,600	280,409,100	7,571,500	2.8%
e) Position FTE								

**B 7****BY PROGRAM****435 Health and Family Services**

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Program: 06 DDES (Ops)

<u>SOURCE OF FUNDS</u>	<u>Annual Summary</u>				<u>Biennial Summary</u>			
	<u>Prior Yr Actual</u>	<u>Adjusted Base Year</u>	<u>Agency Request 1st Year</u>	<u>2nd Year</u>	<u>Base Year Doubled (BYD)</u>	<u>Biennial Request</u>	<u>\$ Change From BYD</u>	<u>% Change From BYD</u>
<b>General Purpose Revenue</b>								
a) Total		13,182,100	16,484,300	16,553,900	26,364,200	33,038,200	6,674,000	25.3%
b) State Operations		13,182,100	16,484,300	16,553,900	26,364,200	33,038,200	6,674,000	25.3%
e) Position FTE		120.64	130.28	130.28				
<b>Federal Revenue</b>								
a) Total	24,149,000	27,814,100	30,775,300	30,808,400	55,628,200	61,583,700	5,955,500	10.7%
b) State Operations	24,149,000	27,814,100	30,775,300	30,808,400	55,628,200	61,583,700	5,955,500	10.7%
e) Position FTE		250.32	269.79	269.79				
<b>Program Revenue</b>								
a) Total	4,248,900	6,228,500	5,686,600	5,696,000	12,457,000	11,382,600	(1,074,400)	-8.6%
b) State Operations	4,248,900	6,228,500	5,686,600	5,696,000	12,457,000	11,382,600	(1,074,400)	-8.6%
e) Position FTE		50.53	48.20	48.20				
<b>Program Revenue Service</b>								
a) Total	4,497,600	1,826,100	2,011,900	1,989,400	3,652,200	4,001,300	349,100	9.6%
b) State Operations	4,497,600	1,826,100	2,011,900	1,989,400	3,652,200	4,001,300	349,100	9.6%
e) Position FTE		13.01	14.44	14.44				
<b>Total</b>								
a) Total	32,895,600	49,050,800	54,958,100	55,047,700	98,101,600	110,005,800	11,904,200	12.1%
b) State Operations	32,895,600	49,050,800	54,958,100	55,047,700	98,101,600	110,005,800	11,904,200	12.1%
e) Position FTE		434.50	462.71	462.71				

**B 7****BY PROGRAM****435 Health and Family Services**

Printed: 9/14/04 2:51:32 PM

Program: 07 DDES (Aids/LA)

<u>SOURCE OF FUNDS</u>	<u>Annual Summary</u>				<u>Biennial Summary</u>			
	<u>Prior Yr Actual</u>	<u>Adjusted Base Year</u>	<u>Agency Request 1st Year</u>	<u>2nd Year</u>	<u>Base Year Doubled (BYD)</u>	<u>Biennial Request</u>	<u>\$ Change From BYD</u>	<u>% Change From BYD</u>
<b>General Purpose Revenue</b>								
a) Total		449,383,100	447,935,800	448,542,800	898,766,200	896,478,600	(2,287,600)	-0.3%
c) Local Assistance		307,082,100	305,859,800	306,466,800	614,164,200	612,326,600	(1,837,600)	-0.3%
d) Aids to Ind. & Org.		142,301,000	142,076,000	142,076,000	284,602,000	284,152,000	(450,000)	-0.2%
e) Position FTE								
<b>Federal Revenue</b>								
a) Total	138,465,400	147,963,200	147,649,400	147,774,800	295,926,400	295,424,200	(502,200)	-0.2%
c) Local Assistance	95,874,800	99,234,900	99,148,100	99,273,500	198,469,800	198,421,600	(48,200)	0.0%
d) Aids to Ind. & Org.	42,590,600	48,728,300	48,501,300	48,501,300	97,456,600	97,002,600	(454,000)	-0.5%
e) Position FTE								
<b>Program Revenue</b>								
a) Total	1,886,400	1,115,000	2,050,000	2,247,500	2,230,000	4,297,500	2,067,500	92.7%
c) Local Assistance	1,886,400	1,115,000	2,050,000	2,247,500	2,230,000	4,297,500	2,067,500	92.7%
e) Position FTE								
<b>Program Revenue Service</b>								
a) Total	29,585,600	34,153,700	32,195,200	31,039,200	68,307,400	63,234,400	(5,073,000)	-7.4%
c) Local Assistance	1,199,200	3,232,800	686,100	686,100	6,465,600	1,372,200	(5,093,400)	-78.8%
d) Aids to Ind. & Org.	28,386,400	30,920,900	31,509,100	30,353,100	61,841,800	61,862,200	20,400	0.0%
e) Position FTE								
<b>Total</b>								
a) Total	169,937,500	632,615,000	629,830,400	629,604,300	1,265,230,000	1,259,434,700	(5,795,300)	-0.5%
c) Local Assistance	98,960,400	410,664,800	407,744,000	408,673,900	821,329,600	816,417,900	(4,911,700)	-0.6%
d) Aids to Ind. & Org.	70,977,000	221,950,200	222,086,400	220,930,400	443,900,400	443,016,800	(883,600)	-0.2%
e) Position FTE								

**B 7****BY PROGRAM****435 Health and Family Services**

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Program: 08 Exec Svcs

<u>SOURCE OF FUNDS</u>	<u>Annual Summary</u>				<u>Biennial Summary</u>			
	<u>Prior Yr Actual</u>	<u>Adjusted Base Year</u>	<u>Agency Request 1st Year</u>	<u>2nd Year</u>	<u>Base Year Doubled (BYD)</u>	<u>Biennial Request</u>	<u>\$ Change From BYD</u>	<u>% Change From BYD</u>
<b>General Purpose Revenue</b>								
a) Total		15,798,400	14,216,600	14,216,600	31,596,800	28,433,200	(3,163,600)	-10.0%
b) State Operations		15,798,400	14,216,600	14,216,600	31,596,800	28,433,200	(3,163,600)	-10.0%
e) Position FTE		129.91	127.92	127.92				
<b>Federal Revenue</b>								
a) Total	6,609,300	7,807,100	14,362,600	11,832,200	15,614,200	26,194,800	10,580,600	67.8%
b) State Operations	6,609,300	7,807,100	14,362,600	11,832,200	15,614,200	26,194,800	10,580,600	67.8%
e) Position FTE		61.58	60.68	60.68				
<b>Program Revenue</b>								
a) Total	111,000	500	500	500	1,000	1,000		0.0%
b) State Operations	111,000	500	500	500	1,000	1,000		0.0%
e) Position FTE								
<b>Program Revenue Service</b>								
a) Total	27,159,500	36,546,600	34,965,600	36,230,200	73,093,200	71,195,800	(1,897,400)	-2.6%
b) State Operations	27,159,500	36,546,600	34,965,600	36,230,200	73,093,200	71,195,800	(1,897,400)	-2.6%
e) Position FTE		200.06	201.56	201.56				
<b>Total</b>								
a) Total	33,879,900	60,152,600	63,545,300	62,279,500	120,305,200	125,824,800	5,519,600	4.6%
b) State Operations	33,879,900	60,152,600	63,545,300	62,279,500	120,305,200	125,824,800	5,519,600	4.6%
e) Position FTE		391.55	390.16	390.16				

**B 7****BY PROGRAM****435 Health and Family Services**

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**Program:**

<u>SOURCE OF FUNDS</u>	<u>Annual Summary</u>				<u>Biennial Summary</u>			
	<u>Prior Yr Actual</u>	<u>Adjusted Base Year</u>	<u>Agency Request 1st Year</u>	<u>2nd Year</u>	<u>Base Year Doubled (BYD)</u>	<u>Biennial Request</u>	<u>\$ Change From BYD</u>	<u>% Change From BYD</u>
<b>General Purpose Revenue</b>								
a) Total		2,384,674,800	2,630,902,400	2,796,041,600	4,769,349,600	5,426,944,000	657,594,400	13.8%
b) State Operations		225,732,800	238,783,700	241,784,800	451,465,600	480,568,500	29,102,900	6.4%
c) Local Assistance		357,258,600	351,132,800	355,454,000	714,517,200	706,586,800	(7,930,400)	-1.1%
d) Aids to Ind. & Org.		1,801,683,400	2,040,985,900	2,198,802,800	3,603,366,800	4,239,788,700	636,421,900	17.7%
e) Position FTE		2,142.10	2,212.33	2,212.33				
<b>Federal Revenue</b>								
a) Total	3,602,350,100	3,253,243,500	3,251,227,500	3,389,644,000	6,506,487,000	6,640,871,500	134,384,500	2.1%
b) State Operations	191,234,400	177,070,700	211,152,000	207,416,100	354,141,400	418,568,100	64,426,700	18.2%
c) Local Assistance	159,971,300	162,054,200	164,946,100	167,457,000	324,108,400	332,403,100	8,294,700	2.6%
d) Aids to Ind. & Org.	3,251,144,400	2,914,118,600	2,875,129,400	3,014,770,900	5,828,237,200	5,889,900,300	61,663,100	1.1%
e) Position FTE		1,086.49	1,098.08	1,097.08				
<b>Program Revenue</b>								
a) Total	260,930,400	268,664,300	266,410,900	274,529,500	537,328,600	540,940,400	3,611,800	0.7%
b) State Operations	194,378,800	187,778,200	180,857,300	182,939,400	375,556,400	363,796,700	(11,759,700)	-3.1%
c) Local Assistance	3,165,600	2,593,200	3,364,000	3,292,500	5,186,400	6,656,500	1,470,100	28.3%
d) Aids to Ind. & Org.	63,386,000	78,292,900	82,189,600	88,297,600	156,585,800	170,487,200	13,901,400	8.9%
e) Position FTE		2,584.15	2,400.87	2,400.87				
<b>Program Revenue Service</b>								
a) Total	140,853,800	161,808,900	149,506,000	149,835,100	323,617,800	299,341,100	(24,276,700)	-7.5%
b) State Operations	55,783,600	66,350,800	65,601,500	67,058,600	132,701,600	132,660,100	(41,500)	0.0%
c) Local Assistance	25,598,000	28,350,500	25,587,300	25,581,900	56,701,000	51,169,200	(5,531,800)	-9.8%
d) Aids to Ind. & Org.	59,472,300	67,107,600	58,317,200	57,194,600	134,215,200	115,511,800	(18,703,400)	-13.9%
e) Position FTE		390.71	397.49	397.49				
<b>Segregated Revenue</b>								
a) Total	937,383,600	296,318,900	257,228,300	281,614,800	592,637,800	538,843,100	(53,794,700)	-9.1%
b) State Operations	5,924,400	5,346,400	7,109,400	7,363,900	10,692,800	14,473,300	3,780,500	35.4%
d) Aids to Ind. & Org.	931,459,200	290,972,500	250,118,900	274,250,900	581,945,000	524,369,800	(57,575,200)	-9.9%
e) Position FTE		7.40	6.83	6.83				



**B 7****BY PROGRAM****435 Health and Family Services**

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**Program:**

<u>SOURCE OF FUNDS</u>	<u>Annual Summary</u>				<u>Biennial Summary</u>			
	<u>Prior Yr Actual</u>	<u>Adjusted Base Year</u>	<u>Agency Request 1st Year</u>	<u>2nd Year</u>	<u>Base Year Doubled (BYD)</u>	<u>Biennial Request</u>	<u>\$ Change From BYD</u>	<u>% Change From BYD</u>
<b>Total</b>								
a) Total	4,941,517,900	6,364,710,400	6,555,275,100	6,891,665,000	12,729,420,800	13,446,940,100	717,519,300	5.6%
b) State Operations	447,321,200	662,278,900	703,503,900	706,562,800	1,324,557,800	1,410,066,700	85,508,900	6.5%
c) Local Assistance	188,734,800	550,256,500	545,030,200	551,785,400	1,100,513,000	1,096,815,600	(3,697,400)	-0.3%
d) Aids to Ind. & Org.	4,305,461,900	5,152,175,000	5,306,741,000	5,633,316,800	10,304,350,000	10,940,057,800	635,707,800	6.2%
e) Position FTE		6,210.85	6,115.60	6,114.60				

# Decision Item Summary



Department: 435 DHFS

Decision Item: 2000 Adjusted Base

Printed: 2:49 PM Tuesday, September 14, 2004

Expenditure Items	First Year			Second Year		
	Adj Base Year	Changes to Bas	Total Budget	Adj Base Year	Changes to Base	Total Budget
01 Permanent Position Salaries	253,174,700		253,174,700	253,174,700		253,174,700
02 Turnover						
03 Project Position Salaries	1,745,500		1,745,500	1,745,500		1,745,500
04 LTE Salaries	2,587,200		2,587,200	2,587,200		2,587,200
05 Fringe Benefits	99,330,800		99,330,800	99,330,800		99,330,800
06 Supplies and Services	222,562,700		222,562,700	222,562,700		222,562,700
07 Permanent Property	3,847,600		3,847,600	3,847,600		3,847,600
08 Unallotted Reserve						
09 Aids to Individuals & Organizations	5,177,379,900		5,177,379,900	5,177,379,900		5,177,379,900
10 Local Assistance	539,177,500		539,177,500	539,177,500		539,177,500
11 One-Time Financing	3,876,100		3,876,100	3,876,100		3,876,100
12 Debt Service	12,565,800		12,565,800	12,565,800		12,565,800
13 Food	3,108,300		3,108,300	3,108,300		3,108,300
14 Variabled Non-Food	16,690,500		16,690,500	16,690,500		16,690,500
15 Internal Data Processing	19,068,200		19,068,200	19,068,200		19,068,200
16 Rent (leased and state-owned)	9,595,600		9,595,600	9,595,600		9,595,600
17 Total Cost	6,364,710,400		6,364,710,400	6,364,710,400		6,364,710,400
18 Project Positions Authorized	46.52	0.00	46.52	46.52	0.00	46.52
19 Classified Positions Authorized	6,154.33	0.00	6,154.33	6,154.33	0.00	6,154.33
20 Unclassified Positions Authorized	10.00	0.00	10.00	10.00	0.00	10.00
21 Position Totals	6,210.85	0.00	6,210.85	6,210.85	0.00	6,210.85

# **DEPARTMENT OF HEALTH AND FAMILY SERVICES**

## **AGENCY DESCRIPTION**

The department is headed by a secretary appointed by the Governor, and has five divisions. The department works in partnership with local governments, health and human services agencies, private providers, and concerned and affected citizens to:

- Foster the availability and accessibility of care, treatment and other assistance for persons most in need through careful planning of services, and efficient distribution and use of resources.
- Promote individual, family and community well-being and health through vigorous programs to reduce or prevent avoidable illness, disability or dependency and their associated costs.
- Encourage local public and private initiative and support for human service programs.
- Give priority to the interests and needs of vulnerable persons including children and the elderly, those in need of long-term support, and families.
- Provide for public safety and protection through programs for adult criminal offenders who are mentally or emotionally impaired.
- Provide incentives and oversight so that public funds are put to effective use. Programs must be characterized by acceptable quality without unnecessary cost, accountability without needless paperwork, creativity and innovation without loss of purpose, and efficiency without jeopardizing access, equity or availability.
- Carry out these responsibilities with the participation and advice of communities, providers, clients and citizens in a way that respects the dignity and self-reliance of everyone involved.

## **MISSION**

The department helps individuals and families build a healthy, safe and dignified life through an array of aging, public health and mental health services, and through programs such as Medicaid, FamilyCare and SeniorCare.

## **PROGRAMS, GOALS, OBJECTIVES AND ACTIVITIES**

### **Program 2: Disability and Elder Services: Institutions**

### **Program 3: Children and Family Services**

Goal: Develop effective, efficient, accessible human service systems that provide quality care, services and supports.

Objective/Activity: Reduce the incidence of child abuse and neglect among Wisconsin children through the Brighter Futures Initiative; Safe and Stable Families Program; Title IV-E; POCAN Projects; and other child abuse and neglect prevention efforts.

### **Program 4: Health Services Planning, Regulation and Delivery; Health Care Financing**

Goal: Promote actions that improve and protect the health and well-being of the people in Wisconsin.

Objective/Activity: Increase the percentage of Wisconsin uninsured low-income children and parents that have health care coverage through implementation of the BadgerCare program and Medical Assistance program for low-income families.

#### **Program 5: Public Health Services Planning, Regulations and Delivery; Aids and Local Assistance**

Goal: Promote actions that improve and protect the health and well-being of the people in Wisconsin.

Objective/Activity: Reduce the prevalence of current cigarette smoking among youth through an expansion of efforts under the Thomas T. Melvin Youth Tobacco Program and through the collaborative efforts of the Divisions of Public Health, Children and Family Services, and Disability and Elder Services.

Objective/Activity: Reduce the prevalence of smoking among adults through smoking cessation activities and through community-based efforts to reduce tobacco use.

Objective/Activity: Reduce the number of people who acquire HIV infection by preventing infection among high-risk persons; increasing knowledge of serostatus among those infected; increasing prevention interventions for persons living with HIV; strengthening the prevention and treatment interface; increasing commitment and cooperation from community partners; and evaluating HIV prevention programs.

Objective/Activity: Increase the rate at which Wisconsin children are immunized against measles, mumps, rubella, tetanus, pertussis, diphtheria, polio and Hib by supplying vaccines for immunization, enforcement of the Student Immunization Law, utilization of the immunization registry, assessing providers' immunization records, and collaboration and education.

#### **Program 7: Disability and Elder Services; Aids and Local Assistance**

Goal: Develop effective, efficient and accessible human service systems that provide quality care, services and supports.

Objective/Activity: Increase the number of developmentally disabled persons served by the CIP 1A program versus the Centers for the Developmentally Disabled by increasing the CIP 1A placement rate; educating guardians on the benefits of community placements; developing appropriate supports for community placements; and implementing effective oversight and quality assurance measures for community placements.

### **PERFORMANCE MEASURES**

#### **HISTORICAL DATA**

Prog. No.	Performance Measure	Actual FY02
3., 5., 7.	Percent of Wisconsin youth (grades 9-12) who smoke.	27%
3., 5., 7.	Percent of Wisconsin youth (grades 6-8) who smoke	9%
5., 7.	Percent of Wisconsin adults (persons 18 and over) who smoke.	23%
5.	Number of persons in Wisconsin with newly reported HIV infections (calendar year).	389
3., 4., 5.	Rate of completion for primary vaccinations among Wisconsin two-year-olds (calendar year).	80%

Prog. No.	Performance Measure	Actual FY02
4.	Percent of uninsured eligible low-income children and adults enrolled in BadgerCare/Medical Assistance.	81%
3., 5.	Rate of child abuse and neglect victimization in Wisconsin per 1,000 children under 18-years of age (calendar year).	8.7
2., 4., 7.	Number of participants in the CIP 1A program (December 31 each year).	1,149

#### FY03 AND FY04 GOALS AND ACTUALS

Prog. No.	Performance Measure	Goal FY03	Actual FY03	Goal FY04	Actual* FY04
3., 5., 7.	Percent of Wisconsin youth (grades 9-12) who smoke.	31%	24%	31%	22%
3., 5., 7.	Percent of Wisconsin youth (grades 6-8) who smoke	9%	7%	8%	7%
5., 7.	Percent of Wisconsin adults (persons 18 and over) who smoke.	22%	22%	22%	22%
5.	Number of persons in Wisconsin with newly reported HIV infections (calendar year).	320	365	311	368
3., 4., 5.	Rate of completion for primary vaccinations among Wisconsin two-year-olds (calendar year).	85%	83%	86%	84%
4.	Percent of uninsured eligible low-income children and adults enrolled in BadgerCare/Medical Assistance.	77%	81%	77%	81%
3., 5.	Rate of child abuse and neglect victimization in Wisconsin per 1,000 children under 18-years of age (calendar year).	8.9	7.5	8.8	7.3
2., 4., 7.	Number of participants in the CIP 1A program (December 31 each year).	1,184	1,170	1,226	1,224

\*Selected data for 2003 and all data for 2004 are estimates rather than actuals. Actual data were not yet available.

FY05, FY06 AND FY07 GOALS

Prog. No.	Performance Measure	Goal FY05	Goal FY06	Goal FY07
3., 5., 7.	Percent of Wisconsin youth (grades 9-12) who smoke.	22%	20%	20%
3., 5., 7.	Percent of Wisconsin youth (grades 6-8) who smoke	7%	6%	6%
5., 7.	Percent of Wisconsin adults (persons 18 and over) who smoke.	21%	21%	20%
5.	Number of persons in Wisconsin with newly reported HIV infections (calendar year).	350	332	316
3., 4., 5.	Rate of completion for primary vaccinations among Wisconsin two-year-olds (calendar year).	85%	86%	87%
4.	Percent of uninsured eligible low-income children and adults enrolled in BadgerCare/Medical Assistance.	81%	82%	83%
3., 5.	Rate of child abuse and neglect victimization in Wisconsin per 1,000 children under 18-years of age (calendar year).	7.1	7.0	6.9
2., 4., 7.	Number of participants in the CIP 1A program (December 31 each year).	1,282	1,292	1,302

TABLE OF CONTENTS		
DECISION ITEM NARRATIVE--BY DIN NUMBER		
DIN #	Page	DIN Title (Description)
		<b><i>Statewide Standard Budget Items</i></b>
3001	1	Turnover Reduction
3002	1	Remove Noncontinuing Elements from Base
3003	2	Full Funding of Salaries and Fringe
3007	2	Overtime
3008	2	Night and Weekend Differential
3010	3	Full Funding of Lease Costs and Directed Moves
3011	3	Minor Transfers within the Same Alpha Appropriation
		<b><i>Departmentwide Standard Budget Items</i></b>
4502	4	Food
4503	4	Rent and Rent Debt Services
4515	4	Variable Non-Food
4516	5	Fuel and Utilities Reestimates for PR
4525	6	Extend/Convert Project Positions
4550	6	PR/PRS Base Reestimates
4555	7	PRF Base Reestimates
		<b><i>Programs 1 &amp; 5 -- Division of Public Health</i></b>
5101	7	OSHA Transfer to UW Laboratory of Hygiene
5102	8	Expanding Dental Services through Technical Colleges
5103	9	Seal-A-Smile Expansion
5104	9	Parental Access to Immunization Registry
5105	10	Transfer Bureau of Health Information and Policy
5106	11	Family Foundations
5107	12	Repeal Tanning Regulation
5108	12	Transfer Sanitarian Registration
5109	13	Lead Registry Modifications
5110	13	Groundwater Program Reestimate
		<b><i>Program 2 -- Division of Disability and Elder Services (Institutions)</i></b>
5200	13	Institute Split
5201	14	Sexually Violent Persons Program Reestimate
5202	15	Mental Health Institutions Physician Services Billing
5203	15	Shared Services
5204	16	CIP 1A Reestimate
		<b><i>Program 3 -- Division of Children &amp; Family Services</i></b>
5301	17	Community Aids
5302	18	Milwaukee Child Welfare Reestimate
5303	19	Child Welfare Program Enhancement Plan

DECISION ITEM NARRATIVE--BY DIN NUMBER		
DIN #	Page	DIN Title (Description)
5304	20	Foster Care Rate Increase
5305	20	WiSACWIS Reestimate
5306	21	State Foster Care and Adoption Assistance Reestimate
5307	22	Kinship Care Reestimate
5308	22	Funding for Domestic Abuse Grant Program
		<b><i>Program 4 -- Division of Health Care Financing</i></b>
5400	23	MA Base Reestimate
5401	24	BadgerCare Reestimate
5402	25	SeniorCare Reestimate
5403	26	MA Contracts Reestimate
5404	27	Disease Aids Reestimate
5405	28	HIRSP Reestimate
5410	29	Eligibility Quality Assurance
5411	30	Transportation Broker
5412	31	Emergency Room Utilization
5413	32	Eliminate Physician Prescription Requirement for MH Services
5420	32	Expansion of SSI Managed Care
5421	33	MA Coverage for Youths Leaving Out-of-Home Care
5422	34	Prenatal Care for Non-qualified Immigrant Women
5441	35	HIRSP Eligibility of Individuals Receiving Limited MA Benefits
5442	36	HIRSP Pharmacy Reform
5443	37	HIRSP Plan 2 Deductible
5451	37	Cemetery, Funeral, and Burial Aids Program
5460	38	Changing the Medicaid 'Grace Month' Policy
5461	38	Medical Assistance Services for Children in RCCs
5462	39	Medical Assistance Purchase Plan Premium Change
5463	40	Spousal Support for Individuals Receiving Long Term Care Services
5464	41	Estate Recovery for the PACE and Partnership Programs
5465	41	Recovery of Incorrect BadgerCare and Medicaid Payments
5466	42	Medicaid, BadgerCare, and SeniorCare Pharmacy Reimbursement
5467	43	Third Party Liability
5469	44	Medicaid Fraud Prevention
5470	44	Managed Care for Low-Income Families
		<b><i>Programs 6 &amp; 7 -- Division of Disability and Elder Services (Non-institutions)</i></b>
5600	45	SSI Benefits and Administration Reestimate
5601	45	Administration of SSI Program
5602	46	Caregiver Investigations and Caregiver Background Check Fees
5603	47	Life Lease
5604	47	Children's Long-Term Support
5607	48	Milwaukee County Mental Health Complex Funding
5608	49	State Independent Living Council



DECISION ITEM NARRATIVE--BY DIN NUMBER		
DIN #	Page	DIN Title (Description)
5620	49	Mental Health and Substance Abuse Services for Child Welfare Families
5621	50	Community Opportunities and Recovery Waiver
5622	51	PATH Program Transfer to Department of Commerce
5623	51	Female Offender Re-Integration Program
		<b><i>Program 8 -- Executive Services</i></b>
5801	52	Administrative Transfers
5802	53	PR/FED/SEG Position Cuts

### Turnover Reduction (DIN 3001)

This decision item removes 3% of permanent position salaries under the assumption that savings will result from position vacancies in appropriations with at least 50 FTE.

#### Fiscal Effect Summary

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ (2,018,900)		\$ (2,018,900)		\$ (4,037,800)	
FED	\$ (1,025,300)		\$ (1,025,300)		\$ (2,050,600)	
PR	\$ (1,939,900)		\$ (1,939,900)		\$ (3,879,800)	
PRS	\$ (411,200)		\$ (411,200)		\$ (822,400)	
SEG						
Total	\$ (5,395,300)		\$ (5,395,300)		\$ (10,790,600)	

### Remove Noncontinuing Elements from Base (DIN 3002)

This decision item removes from the base all noncontinuing positions and dollars approved on a one-time basis. Noncontinuing elements include project positions scheduled to end prior to June 30, 2007, and funding budgeted for a specific one-time purpose.

#### Fiscal Effect Summary

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ (95,800)	(2.20)	\$ (165,200)	(2.20)	\$ (261,000)	(2.20)
FED	\$ (3,200,100)	(2.80)	\$ (5,324,200)	(33.30)	\$ (8,524,300)	(33.30)
PR	\$ (356,600)		\$ (356,600)		\$ (713,200)	
PRS	\$ (380,000)		\$ (380,000)		\$ (760,000)	
SEG						
Total	\$ (4,032,500)	(5.00)	\$ (6,226,000)	(35.50)	\$ (10,258,500)	(35.50)

### Full Funding of Salaries and Fringe (DIN 3003)

This decision item increases or decreases adjusted base year salary and fringe benefit levels to documented actual levels. The new agency fringe rate is applied to the adjusted salary levels.

#### Fiscal Effect Summary

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ 4,254,300		\$ 4,254,300		\$ 8,508,600	
FED	\$ 8,585,400		\$ 8,585,400		\$ 17,170,800	
PR	\$ 2,809,500		\$ 2,809,500		\$ 5,619,000	
PRS	\$ 5,514,400		\$ 5,514,400		\$ 11,028,800	
SEG	\$ (18,100)		\$ (18,100)		\$ (36,200)	
Total	\$ 21,145,500		\$ 21,145,500		\$ 42,291,000	

### Overtime (DIN 3007)

This decision item restores the amounts budgeted in Act 33 for overtime at the Division of Disability and Elder Services institutions. These funds were removed in the Department's Full Funding of Continuing Position Salaries and Fringe Benefits decision item number 3003.

#### Fiscal Effect Summary

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ 2,181,900		\$ 2,181,900		\$ 4,363,800	
FED						
PR	\$ 3,278,500		\$ 3,278,500		\$ 6,557,000	
PRS	\$ 115,700		\$ 115,700		\$ 231,400	
SEG						
Total	\$ 5,576,100		\$ 5,576,100		\$ 11,152,200	

### Night and Weekend Differential (DIN 3008)

This decision item restores funds that were budgeted in FY05 under Decision Item 3008 in 2003 Wisconsin Act 33. The budgeted funds include salary and fringe increments for employees entitled by contract to a wage premium. These increases cover holiday, night, nurse responsibility, weekend differential, specialty standby/on call and permanent payments.

### Fiscal Effect Summary

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ 1,153,600		\$ 1,153,600		\$ 2,307,200	
FED	\$ 68,500		\$ 68,500		\$ 137,000	
PR	\$ 2,358,100		\$ 2,358,100		\$ 4,716,200	
PRS	\$ 133,000		\$ 133,000		\$ 266,000	
SEG						
Total	\$ 3,713,200		\$ 3,713,200		\$ 7,426,400	

### Full Funding of Lease Costs and Directed Moves (DIN 3010)

This decision item requests space rental supplements consistent with the Department of Administration instructions.

### Fiscal Effect Summary

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ 56,400		\$ 56,400		\$ 112,800	
FED						
PR						
PRS						
SEG						
Total	\$ 56,400		\$ 56,400		\$ 112,800	

### Minor Transfers Within the Same Alpha Appropriation (DIN 3011)

This decision item requests minor transfers of funds and/or positions within the same alpha appropriation and within base funding and position levels.

### Fiscal Effect Summary

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ -		\$ -		\$ -	
FED	\$ -		\$ -		\$ -	
PR	\$ -		\$ -		\$ -	
PRS	\$ -		\$ -		\$ -	
SEG						
Total	\$ -		\$ -		\$ -	

**Food  
(DIN 4502)**

The Department requests an increase of \$45,100 GPR and \$286,200 PR in FY06 and an increase of \$151,500 GPR and \$338,200 PR in FY07 to fund costs in food services for the facilities administered by the Division of Disability and Elder Services. These facilities include Mendota and Winnebago Mental Health Institutes, the Wisconsin Resource Center, Sand Ridge Secure Treatment Center, and Central, Northern and Southern Centers for the Developmentally Disabled.

**Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ 45,100		\$ 151,500		\$ 196,600	
FED						
PR	\$ 286,200		\$ 338,200		\$ 624,400	
PRS						
SEG						
Total	\$ 331,300		\$ 489,700		\$ 821,000	

**Rent and Rent Debt Services  
(DIN 4503)**

This decision item adjusts the base level of funding for projected increases in space rental costs for state-owned space, increases in rental rates of leased space, and for the debt service portion of space rent costs that is not reimbursed by the federal government. Rent costs for each fund source are determined by applying the percent of the total positions supported by fund source to the total rent costs.

**Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR						
FED	\$ 524,700		\$ 548,300		\$ 1,073,000	
PR	\$ 130,500		\$ 136,400		\$ 266,900	
PRS	\$ (550,600)		\$ (545,300)		\$ (1,095,900)	
SEG	\$ 4,100		\$ 4,300		\$ 8,400	
Total	\$ 108,700		\$ 143,700		\$ 252,400	

**Variable Non-Food  
(DIN 4515)**

The Department requests \$766,600 GPR and \$752,900 PR in FY06 and \$1,859,100 GPR and \$1,514,500 PR in FY07 to fund the increased cost of variable non-food expenses for the Mental Health Institutes, the Wisconsin Resource Center, Sand Ridge Secure Treatment Center and

the Centers for the Developmentally Disabled. These expenditures are directly related to the size of the population and include medical services and supplies, drugs, clothing and other supplies.

This request reflects the continued sharp increase in drug costs that has been experienced at these institutions in recent years and that is expected to continue. Medical services are also increasing as the Department's facilities provide services to more individuals with medical needs. Medical services include such items as hospitalization, diagnostic testing and outpatient medical visits. Drug expenses are based on actual experience at the institutions.

### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ 766,600		\$ 1,859,100		\$ 2,625,700	
FED						
PR	\$ 752,900		\$ 1,514,500		\$ 2,267,400	
PRS						
SEG						
Total	\$ 1,519,500		\$ 3,373,600		\$ 4,893,100	

### **Fuel and Utilities Reestimates for PR (DIN 4516)**

The Department requests \$381,600 PR in FY06 and \$818,100 PR in FY07 to pay for projected increases in fuel for the facilities administered by the Division of Disability and Elder Services. These facilities include Mendota and Winnebago Mental Health Institutes, the Wisconsin Resources Center, Sand Ridge Secure Treatment Center and Central, Northern and Southern Centers for the Developmentally Disabled. The request is based on the Department of Administration's inflation assumptions.

### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR						
FED						
PR	\$ 381,600		\$ 818,100		\$ 1,199,700	
PRS						
SEG						
Total	\$ 381,600		\$ 818,100		\$ 1,199,700	

**Extend/Convert Project Positions  
(DIN 4525)**

The Department requests the extension or conversion from project to permanent status of positions ending in the 2005-07 biennium.

**Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ 70,300	2.20	\$ 139,700	2.20	\$ 210,000	2.20
FED	\$ 86,100	2.80	\$ 2,210,200	33.30	\$ 2,296,300	33.30
PR						
PRS						
SEG						
Total	\$ 156,400	5.00	\$ 2,349,900	35.50	\$ 2,506,300	35.50

**PR/PRS Base Restimates  
(DIN 4550)**

The Department requests adjustments in PR/PR-S appropriations to reflect current projections of program costs.

**Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR						
FED						
PR	\$ 2,682,500	(1.79)	\$ 3,082,400	(1.79)	\$ 5,764,900	(1.79)
PRS	\$ (17,761,800)	1.79	\$ (16,528,900)	1.79	\$ (34,290,700)	1.79
SEG						
Total	\$ (15,079,300)		\$ (13,446,500)		\$ (28,525,800)	

**PRF Base Reestimates  
(DIN 4555)**

The Department requests adjustments in PRF appropriations to reflect current projections of program costs.

**Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR						
FED	\$ 11,635,400		\$ 12,492,200		\$ 24,127,600	
PR						
PRS						
SEG						
Total	\$ 11,635,400		\$ 12,492,200		\$ 24,127,600	

**OSHA Transfer to UW Laboratory of Hygiene  
(DIN 5101)**

The Department requests the reduction of (\$105,600) GPR and (.99) GPR FTE and (\$964,000) FED and (8.01) FED FTE and (\$54,500) PR and (.50) PR FTE in both years of the biennium to reflect the transfer of the Occupational Health Consultation program to the University of Wisconsin's State Laboratory of Hygiene (SLOH). The University will create new, classified positions, into which existing staff will be transferred as part of this program transfer. The program transfer is scheduled to occur in October 2004.

The Wisconsin Occupational Health Consultation Program is a state-administered program which provides industrial hygiene services to small businesses. States must provide a 10% match for all expenses except certain travel and training costs. The consultation program offers onsite occupational health/industrial hygiene consultation, at the request of the owners or managers of private companies, to assist Wisconsin employers in meeting their obligations and responsibilities under the federal Occupational Safety and Health Act.

The State Laboratory of Hygiene currently carries out other OSHA-supported activities. The Occupational Health Consultation Program is consistent with and reinforces the SLOH's other OSHA-related funding. This transfer is endorsed by a broad coalition of Wisconsin businesses and labor groups that support the continuation of the current program.

Formal transfer of program responsibility will occur in October 2004, at the beginning of the new federal grant cycle. SLOH will become the grantee for the federal OSHA funds of \$964,000 FED at this time.



## Fiscal Effect Summary

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ (105,600)	(0.99)	\$ (105,600)	(0.99)	\$ (211,200)	(0.99)
FED	\$ (964,000)	(8.01)	\$ (964,000)	(8.01)	\$ (1,928,000)	(8.01)
PR	\$ (54,500)	(0.50)	\$ (54,500)	(0.50)	\$ (109,000)	(0.50)
PRS						
SEG						
Total	\$ (1,124,100)	(9.50)	\$ (1,124,100)	(9.50)	\$ (2,248,200)	(9.50)

## Expanding Dental Services Through Technical Colleges (DIN 5102)

The Department requests \$117,200 GPR and \$42,600 FED in FY06 and \$117,500 GPR and \$42,300 FED in FY07 for dental services to low-income children. This request is composed of \$86,100 GPR in both years of the biennium for the state portion of a grant program to expand dental services at two technical colleges. In addition, the Department requests \$31,100 GPR and \$42,600 FED in FY06 and \$31,400 GPR and \$42,300 FED in FY07 to fund the increased Medicaid costs that will result from the proposed expansion of dental services through the grant program. Technical colleges will be required to provide a 50% match for the program.

Eleven of the 16 technical colleges in Wisconsin have dental assistant and dental hygienist training programs. These facilities are underutilized when school is not in session. To expand dental services to low-income children, the Department proposes to create a grant program which will enable two technical colleges to operate their clinics year-round. The grants will enable the technical colleges to contract with dentists, registered dental hygienists and dental assistants to provide preventive and restorative dental services. At the same time, dental hygienist and dental assistant students at the technical colleges can acquire service-learning delivery opportunities within the technical college system.

The professional staff funded by this grant will act as mentors for the students who will assist the staff. The students will participate in patient treatment; comprehensive service delivery will be integrated into the curriculum. The grants will also allow professional staff to provide preventive and restorative services to low-income children at the technical college sites at times when no students are being trained, to ensure full utilization of the site.

## Fiscal Effect Summary

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ 117,200		\$ 117,500		\$ 234,700	
FED	\$ 42,600		\$ 42,300		\$ 84,900	
PR						
PRS						
SEG						
Total	\$ 159,800		\$ 159,800		\$ 319,600	

### **Seal-a-Smile Expansion (DIN 5103)**

The Department requests \$67,600 GPR and \$10,400 FED in FY06 and \$67,700 GPR and \$10,300 FED in FY07 to expand the Seal-a-Smile program that provides dental sealants to low income children. The Department proposes to double the current grant program by adding an additional \$60,000 GPR to the program. These funds will enable the program to provide dental sealants to an additional 915 children. In addition, it is assumed that 30% of the children will be Medicaid-eligible and their treatment will result in increased Medicaid costs of \$7,600 GPR and \$10,400 FED in FY06 and \$7,700 GPR and \$10,300 FED in FY07.

The Seal-a-Smile program screens and provides dental sealants to children in school. The program distributes grants to communities, primarily to local public health departments and community agencies. In 2002-03, the program screened 4,368 children and provided 10,657 dental sealants to 2,761 children.

Childhood tooth decay is preventable with a combination of fluoride treatments and dental sealants. Dental sealants are thin plastic coatings, which are applied to the pits and fissures of back teeth. Preventive dental care for children, including such measures as dental sealants, is much less likely to be provided to low-income children, even though this treatment prevents more serious and costly oral health problems. Untreated dental problems often result in visits to the emergency room and expensive restorative procedures. Expanding the Seal-a-Smile program to more children will improve their oral health and lessen the need for extensive dental work later in life. Research indicates that each tooth sealed in the Seal-a-Smile program results in treatment savings of \$58.95.

#### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ 67,600		\$ 67,700		\$ 135,300	
FED	\$ 10,400		\$ 10,300		\$ 20,700	
PR						
PRS						
SEG						
Total	\$ 78,000		\$ 78,000		\$ 156,000	

### **Parental Access to Immunization Registry (DIN 5104)**

The Department requests \$10,300 GPR and \$14,100 FED in FY06 and \$5,500 GPR and \$7,400 FED in FY07 to provide parental access to the Wisconsin Immunization Registry (WIR). These funds will be used to match federal Medical Assistance funds, which will pay for the development and ongoing maintenance costs to WIR for providing parental access functionality.

The Wisconsin Immunization Registry is a web-based automated system, which centralizes record keeping of the immunization records of Wisconsin children. WIR assists public and private providers in keeping children on schedule for their recommended immunizations by

providing local health departments and private healthcare providers with direct access to the central immunization registry. Currently, parents do not have access to the WIR. Providing parental access will help parents have complete and accurate information about their child's immunization status. In order to provide parental access to WIR, programming changes to the system, including the creation of a portal which will allow parents access to their child's immunization record, are needed.

The Department has received a grant from the Centers for Disease Control and Prevention for \$148,600 to pay for the majority of the costs of the development of the parental access module. In addition, the Centers for Medicaid and Medicare (CMS) provides federal funds for the costs of WIR enhancements that are attributable to Medicaid recipients. The state is required to provide \$10,300 GPR for a 10% match to the Medicaid funds, which cannot come from other federal fund sources, and \$5,500 GPR for ongoing costs for the state's share of the maintenance of the module.

### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ 10,300		\$ 5,500		\$ 15,800	
FED	\$ 14,100		\$ 7,400		\$ 21,500	
PR						
PRS						
SEG						
Total	\$ 24,400		\$ 12,900		\$ 37,300	

### **Transfer Bureau of Health Information and Policy (DIN 5105)**

The Department requests the reduction of (5.16) GPR FTE, the reduction of (\$716,500) FED and (5.44) FED FTE, the reduction of (\$154,900) PR and (1.66) PR FTE, and the offsetting increase of \$871,400 PRS and 12.26 PRS FTE in both years of the biennium to reflect the transfer of the Bureau of Health Information (BHI) in the Division of Health Care Financing to the Bureau of Health Information and Policy (BHIP) in the Division of Public Health. The creation of BHIP was part of an overall reorganization of the Division of Public Health which was undertaken to improve program outcomes, reduce overhead, and increase communication and coordination. BHI, including Vital Records, was transferred to DPH and combined with the public health functions of planning, minority health, dental hygiene, and public health nursing. Public health information technology activities were also consolidated in this Bureau, including responsibility for the Public Health Information Network which had previously been the responsibility of the Bureau of Environmental Health.

## Fiscal Effect Summary

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ -	(5.16)	\$ -	(5.16)	\$ -	(5.16)
FED	\$ (716,500)	(5.44)	\$ (716,500)	(5.44)	\$ (1,433,000)	(5.44)
PR	\$ (154,900)	(1.66)	\$ (154,900)	(1.66)	\$ (309,800)	(1.66)
PRS	\$ 871,400	12.26	\$ 871,400	12.26	\$ 1,742,800	12.26
SEG						
Total	\$ -		\$ -		\$ -	

## Family Foundations (DIN 5106)

The Department requests \$531,100 GPR and \$111,300 FED in FY06 and \$2,195,700 GPR and \$443,300 FED in FY07 to initiate the Family Foundations program. Family Foundations is a universal and targeted home visiting program, the goal of which is to offer new families the support they need to become effective, responsible parents. Family Foundations is composed of two primary service components, a one-time home visit to all first-birth families in Wisconsin at a cost of \$122,400 GPR in FY06 and \$367,100 GPR in FY07 and targeted home visiting at a cost of \$408,700 GPR and \$111,300 FED in FY06 and \$1,828,600 GPR and \$443,300 FED in FY07, which will offer ongoing support to first-time families at risk of abuse and/or neglect.

The services of Family Foundations are voluntary. The one-time visit will include basic information about nutrition, infant care, safety and development, identification of needs and connection to resources. A follow-up call will be made to those families who initially refuse the offer, to offer information and resource referrals. Targeted home visiting services are also voluntary and will be offered as needed for up to three years, for those with an identified threshold of risk factors for abuse or neglect. Family Foundations will build on the current efforts of local communities, prohibiting the supplanting of current investments with state funds. Participating communities will be required to provide matching funds for the program. Programs may be administered by county human services agencies, public health departments, community-based organizations or a combination of these groups working in partnership.

## Fiscal Effect Summary

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ 531,100		\$ 2,195,700		\$ 2,726,800	
FED	\$ 111,300		\$ 443,300		\$ 554,600	
PR						
PRS						
SEG						
Total	\$ 642,400		\$ 2,639,000		\$ 3,281,400	

### **Repeal Tanning Regulation (DIN 5107)**

The Department requests the reduction of (\$17,700) PR and (.20) PR FTE in both years of the biennium to eliminate the tanning facility regulation function in the Department. There are a small number of tanning-related complaints each year, and the Department does not have adequate resources to regulate tanning facilities. The Department is also requesting a statutory language change to repeal authority to regulate tanning facilities. The manufacturing of tanning equipment for commercial use will continue to be regulated by the FDA.

#### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR						
FED						
PR	\$ (17,700)	(0.20)	\$ (17,700)	(0.20)	\$ (35,400)	(0.20)
PRS						
SEG						
Total	\$ (17,700)	(0.20)	\$ (17,700)	(0.20)	\$ (35,400)	(0.20)

### **Transfer Sanitarian Registration (DIN 5108)**

The Department requests the reduction of (\$11,400) PR in FY06 and (\$7,000) PR in FY07 to transfer registration of sanitarians from DHFS to the Department of Regulation and Licensing (DRL). The mission of DRL is to protect the citizens of Wisconsin by ensuring the safe and competent practice of licensed professionals by regulating the education, experience and examination requirements, setting professional practice standards and ensuring compliance by enforcing occupational laws. The registration of sanitarians is consistent with the mission of DRL and is an appropriate function to be performed by DRL.

#### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR						
FED						
PR	\$ (11,400)		\$ (7,000)		\$ (18,400)	
PRS						
SEG						
Total	\$ (11,400)		\$ (7,000)		\$ (18,400)	

### Lead Registry Modifications (DIN 5109)

The Department requests the reduction of (\$119,400) PR and (3.0) PR FTE in both years of the biennium to restructure the Lead Registry. Revenues to date are insufficient to cover the costs of the Lead Registry program, and the Department will be exploring ways to expand funding sources for the Registry. As part of this budget initiative, the Department is proposing statutory changes to eliminate the state's mandatory portion of the Lead Registry because that work is duplicated by Local Public Health Departments who are in a better position to track compliance than the state. The Department is also proposing language to simplify the Registry.

#### Fiscal Effect Summary

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR						
FED						
PR	\$ (119,400)	(3.00)	\$ (119,400)	(3.00)	\$ (238,800)	(3.00)
PRS						
SEG						
Total	\$ (119,400)	(3.00)	\$ (119,400)	(3.00)	\$ (238,800)	(3.00)

### Groundwater Program Reestimate (DIN 5110)

The Department requests \$34,700 SEG in FY06 and \$34,600 SEG and in FY07 to reestimate the Groundwater and Air Quality Standards program based on standard budget adjustments.

#### Fiscal Effect Summary

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR						
FED						
PR						
PRS						
SEG	\$ 34,700		\$ 34,600		\$ 69,300	
Total	\$ 34,700		\$ 34,600		\$ 69,300	

### Institute Split (DIN 5200)

The Department requests an increase of \$3,178,400 GPR and 49.72 GPR FTE and a reduction of (\$3,178,400) PR and (49.72) PR FTE in FY06 and an increase of \$2,996,100 GPR and 49.72 GPR FTE and a reduction of (\$2,996,100) PR and (49.72) PR FTE in FY07 as a result of the reestimate of the GPR/PR funding split at the Mendota and Winnebago Mental Health Institutes to reflect changes in their patient populations. The cost of care for forensic commitments is the

responsibility of the state and is funded with GPR. The cost of care for civil commitments and voluntary patients is the responsibility of boards established under s. 51.42 and other third-party payers and is funded with PR revenue received from these payers.

This request updates the current budgeted GPR/PR split to reflect the most recent patient population information. The split calculation is based on actual billable (PR) and non-billable (GPR) populations, adjusted for anticipated population changes, which is consistent with methodologies used in previous biennia. The new splits will be 68% GPR/32% PR at Mendota and 55% GPR/45% PR at Winnebago for both years of the 2005-2007 biennium.

### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ 3,178,400	49.72	\$ 2,996,100	49.72	\$ 6,174,500	49.72
FED						
PR	\$ (3,178,400)	(49.72)	\$ (2,996,100)	(49.72)	\$ (6,174,500)	(49.72)
PRS						
SEG						
Total	\$ -		\$ -		\$ -	

### **Sexually Violent Persons Program Reestimate (DIN 5201)**

The Department requests a reduction of (\$462,900) GPR and an increase of 33.25 FTE in FY06 and an increase of \$1,221,200 GPR and 33.25 FTE in FY07 as a result of reestimating the Sexually Violent Persons (SVP) population, outpatient competency examinations, and the conditional and supervised release programs in the 2005-2007 biennium. The components of the request are an increase of \$1,126,300 GPR and 14.25 GPR FTE in FY06 and \$1,434,400 GPR and 14.25 GPR FTE in FY07 at Sand Ridge Secure Treatment Center (SRSTC) and \$191,800 GPR and 19.0 GPR FTE in FY06 and \$982,800 GPR and 19.0 GPR FTE in FY07 at Wisconsin Resource Center (WRC). These costs are partially offset by a reduction of (\$1,781,000) GPR in FY06 and (\$1,196,000) GPR in FY07 in the Competency Examinations and Conditional and Supervised Release Services appropriation.

Taking account of new legislation (2003 Wisconsin Act 187), which changed the commitment and supervised release criteria for SVPs, and the general trends in the program, it is projected that the number of chapter 980 detentions and commitments will increase and the number of supervised releases will decrease. The current 288 staffed beds within the system will not be able to house the projected population in the 05-07 biennium. To address the projected population, this request opens two currently unused 25-bed units at SRSTC and one 30-bed unused unit at WRC in FY06.

The Supervised Release program provides treatment to individuals considered to be SVPs under chapter 980 and who have been released by the court under the supervision of the Department. The Conditional Release program provides treatment to individuals who have been conditionally released from mental health institutions. The program is a state-funded, community-based program administered by private and public agencies under the supervision of the Department. Competency-to-stand-trial examinations are performed by the Department on

an inpatient or outpatient basis. Inpatient examinations are conducted by department staff in one of the Mental Health Institutes. The Department contracts with a private provider to conduct outpatient competency examinations in a jail or locked unit of a facility.

### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ (462,900)	33.25	\$ 1,221,200	33.25	\$ 758,300	33.25
FED						
PR						
PRS						
SEG						
Total	\$ (462,900)	33.25	\$ 1,221,200	33.25	\$ 758,300	33.25

### **Mental Health Institutions Physician Services Billing (DIN 5202)**

The Department requests an increase of \$125,600 PR in FY06 and \$149,000 PR in FY07 to provide funding for the hiring of LTES to compile and submit the documentation required to bill Medicaid for physician services. This initiative will enable the Department to capture an estimated \$1.3 million in federal Medicaid funding per year for the professional physician expenditures at the Mental Health Institutes (MHIs) for services provided to children and adolescents.

### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR						
FED						
PR	\$ 125,600		\$ 149,000		\$ 274,600	
PRS						
SEG						
Total	\$ 125,600		\$ 149,000		\$ 274,600	

### **Shared Services (DIN 5203)**

The Department requests the reduction of (1.35) GPR FTE, an increase of 2.35 PR FTE and a reduction of (1.00) PRS FTE in both years of the biennium to fund appropriately the Division of Disability and Elder Services (DDES) positions performing services for the institutions, such as buildings and grounds and business office positions. Positions on the Madison campus perform services for Mendota Mental Health Institute (MMHI) and Central Wisconsin Center (CWC). Positions on the Oshkosh campus perform services for Winnebago Mental Health Institute (WMHI) and Wisconsin Resource Center (WRC). This decision item adjusts the direct funding of shared services positions to reflect actual tasks performed and streamlines administrative work by eliminating the billback procedure of PRS positions.



## Fiscal Effect Summary

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ -	(1.35)	\$ -	(1.35)	\$ -	(1.35)
FED						
PR	\$ -	2.35	\$ -	2.35	\$ -	2.35
PRS	\$ -	(1.00)	\$ -	(1.00)	\$ -	(1.00)
SEG						
Total	\$ -		\$ -		\$ -	

### CIP 1A Reestimate (DIN 5204)

The Department requests a decrease of (\$8,920,000) PR and (100.5) PR FTE in both years of the biennium to reflect the relocation of individuals from the state centers for the developmentally disabled to the community. Section 49.45(6b) of the statutes requires the Department to reduce reimbursement to the centers by \$325 per day for each placement made under the Community Integration (CIP1A) program. The following changes are requested for each of the three centers based on actual placements made in FY04 and projected placements for FY05:

*Northern Wisconsin Center:* Act 33, the 2003-2005 biennial budget, provided for the phase-down of long term care services at Northern Wisconsin Center and provided staffing for up to 20 long term care residents in FY05. The Department projects that at most 4 long term care residents will remain at the center in the 2005-2007 biennium and therefore requests the deletion of (145.0 FTE) PR and (\$10,046,300) PR to reflect this population estimate. In addition, a separate decision item, DIN 5801, Administrative Transfers, deletes (6.0 FTE) PR and (\$406,600) PR from the center's budget to reflect the transfer of community capacity team staff from the center to the Bureau of Long Term Support to form a Regional Community Integration Team. With the reductions, a total of 128.5 FTE will remain at Northern Center to staff a 30 bed Intensive Treatment Program (ITP) and an expanded dental outreach clinic. ITP staff will provide care for any remaining long term care residents in the next biennium

*Central Wisconsin Center:* Act 33 deleted 30.0 FTE from Central Wisconsin Center in FY05 based on a projection of 12 placements in the 2003-2005 biennium. The center achieved 4 placements in FY04 and projects 9 placements in FY05. The center must therefore reduce its budget by (\$1,542,100) PR per year in FY06 and FY07 under s. 49.45(6b). A separate decision item, DIN 3003, Full Funding of Salaries and Fringe, deletes (\$957,800) PR per year in salary and fringe budget associated with the 30.0 FTE deleted in Act 33. DIN 5801, Administrative Transfers, deletes (\$361,600) PR per year from the center's budget to reflect the transfer of 7.0 FTE from the center to the Bureau of Long Term Support to form a Regional Community Integration Team. This decision item deletes (\$222,700) PR in FY06 and FY07 to bring the total reduction to (\$1,542,100) PR per year.

*Southern Wisconsin Center:* Act 33 deleted 86.0 FTE from Southern Wisconsin Center in FY05 based on a projection of 35 placements from the center in the 2003-2005 biennium. The center achieved 8 placements in FY04 and expects 8 placements in FY05. Because of the lower than projected number of placements, the Department requests that 44.5 FTE and \$1,471,400 PR in

salary and fringe budget authority be restored to the Center's budget in FY06 and FY07. The net reduction to the center's budget resulting from 16 placements in 2003-2005 will be 41.5 FTE (deleted in FY05 in Act 33) and (\$1,898,000) PR in FY06 and FY07. The spending authority reduction is distributed among the following decision items. DIN 3003, Full Funding of Salaries and Fringe, deletes (\$1,352,900) PR per year in salary and fringe budget associated with the 41.5 FTE deleted in Act 33. DIN 5801, Administrative Transfers, deletes (6.0 FTE) PR and (\$422,700) PR per year from the center's budget to reflect the transfer of community capacity team staff from the center to the Bureau of Long Term Support to form a Regional Community Integration Team. This decision item deletes (\$122,400) PR in FY06 and FY07 from the center's non-salary budget.

### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR						
FED						
PR	\$ (8,920,000)	(100.50)	\$ (8,920,000)	(100.50)	\$ (17,840,000)	(100.50)
PRS						
SEG						
Total	\$ (8,920,000)	(100.50)	\$ (8,920,000)	(100.50)	\$ (17,840,000)	(100.50)

### **Community Aids (DIN 5301)**

The Department requests offsetting changes in federal funding, a technical change in the Family Care adjustment in Community Aids in both years of the biennium, and a technical change to consolidate federal substance abuse Community Aids funding in one budget appropriation. The net fiscal effect of the changes in this budget item is to maintain Community Aids at its base FY05 level.

Community Aids provides funding to counties to use for social, mental health, alcohol/drug abuse and disability services. Community Aids is composed of GPR and federal funds. This budget item decreases Social Services Block Grant (SSBG) funding by (\$272,300) annually to reflect changes in the availability of federal funding and requests an offsetting increase in federal IV-E foster care funding of \$272,300 annually. In addition, to implement a technical correction to reflect Family Care adjustments, this budget item increases Community Aids by \$5,700 GPR annually and decreases the Family Care budget by a corresponding amount. For counties that are Family Care pilots, a portion—up to 22%—of Community Aids funding is transferred from the current Community Aids program to Family Care. Family Care adjustments in Community Aids do not affect the level of Community Aids funding received by non-Family Care counties. This item also consolidates all federal Substance Abuse, Prevention and Treatment (SAPT) Community Aids funding in one appropriation to reduce administrative complexity.

## Fiscal Effect Summary

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ -		\$ -		\$ -	
FED	\$ -		\$ -		\$ -	
PR						
PRS						
SEG						
Total	\$ -		\$ -		\$ -	

### Milwaukee Child Welfare Reestimate (DIN 5302)

The Department requests a decrease of (\$5,117,300) GPR and (16.24) GPR FTE, a decrease of (\$1,118,500) FED (IV-E) and an increase of 16.24 FED FTE, a decrease of (\$150,000) PR (collections), and a decrease of (\$121,100) PRS (federal TANF) in FY06, and a decrease of (\$5,066,100) GPR and (16.24) GPR FTE, (\$1,107,300) FED and an increase of 16.24 FED FTE (IV-E), a decrease of (\$150,000) PR (collections), and a decrease of (\$121,100) PRS (federal TANF) in FY07 to fund the projected needs of the Bureau of Milwaukee Child Welfare (BMCW).

The Department has been responsible for administering the child protective services system in Milwaukee County since January 1, 1998. This budget request includes a reestimate of the funding needed to support BMCW services and operations based on projected caseloads and service expenditures and changes in federal funding claiming rates. The Department has increased the percentage of the BMCW funded with federal IV-E child welfare funds to more closely align the budgeted amount of federal IV-E funds with the activities generating those funds.

The total funds needed to support BMCW have decreased primarily because of two factors. First, the total out-of-home care caseload has steadily declined over recent years. Between January 2002 and June 2004, the out-of-home care caseload decreased over 40%, from 4,507 children to 2,540 children. Out-of-home care caseloads have remained relatively stable in CY04, indicating that this downward trend may be leveling off. The second factor influencing this reestimate is that the cost to support the WiSACWIS information system at BMCW has decreased due to accelerated masterlease payments in the 2003-2005 biennium.

The savings realized by declining caseloads provides needed resources to strengthen services to families served by BMCW. Consistent with the priorities of KidsFirst, the Department proposes reinvesting the savings to further improve services in the following ways: additional training and support to foster and adoptive parents, expanded mental health and domestic violence services for BMCW families, and implementation of the BMCW ombudsmen office. No current services will be reduced for children or their parents as a result of this budget proposal.

## Fiscal Effect Summary

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ (5,117,300)	(16.24)	\$ (5,066,100)	(16.24)	\$ (10,183,400)	(16.24)
FED	\$ (1,118,500)	16.24	\$ (1,107,300)	16.24	\$ (2,225,800)	16.24
PR	\$ (150,000)		\$ (150,000)		\$ (300,000)	
PRS	\$ (121,100)		\$ (121,100)		\$ (242,200)	
SEG						
Total	\$ (6,506,900)		\$ (6,444,500)		\$ (12,951,400)	

### Child Welfare Program Enhancement Plan (DIN 5303)

The Department requests \$1,638,800 GPR, \$684,500 FED (IV-E), and \$160,000 PRS (MA TCM) in FY06 and \$1,677,200 GPR, \$910,000 FED (IV-E), and \$380,400 PRS (MA TCM) in FY07 to implement the Child Welfare Program Enhancement Plan (PEP).

The Department is committed to make improvements to the state's child welfare system to insure the safety, permanence and well being of children throughout Wisconsin. Working with counties, tribes and advocates, the Department developed the Program Enhancement Plan (PEP), which outlines how the state will make necessary improvements. The PEP was submitted to the federal government following their recent Child and Family Services Review (CFSR) of Wisconsin.

Major components of the state's Program Enhancement Plan include providing technical assistance and training to counties, expanding child welfare research, policy, and program analysis, implementing the Department's child welfare quality assurance plan, and funding the Wisconsin Foster Care Resource Center. The Foster Care Resource Center will provide training and support to both current and prospective foster and adoptive parents and county child welfare professionals statewide.

Wisconsin must improve program capacity at the state and local level to achieve performance goals and meet national performance standards. Failure by the state to meet these goals and standards will result in federal financial penalties.

## Fiscal Effect Summary

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ 1,638,800		\$ 1,677,200		\$ 3,316,000	
FED	\$ 684,500		\$ 910,000		\$ 1,594,500	
PR						
PRS	\$ 160,000		\$ 380,400		\$ 540,400	
SEG						
Total	\$ 2,483,300		\$ 2,967,600		\$ 5,450,900	

### **Foster Care Rate Increase (DIN 5304)**

The Department requests \$818,000 GPR and \$297,500 FED in FY06 and \$1,638,400 GPR and \$592,300 FED in FY07 to implement a permanent 10% uniform foster care rate increase effective January 2006. Uniform foster care rates provide a standard scale of payments to foster parents, treatment foster parents, and family operated group homes for the cost of caring for a foster child. Current benefit levels range from \$302 for children four years old and below to \$391 for children 15 years and above and are intended to cover food, clothing, housing, personal care and other expenses.

Uniform foster care rates are established under s. 48.62 (4) for all children whose cost of care is paid directly to foster parents by a county department of social or human services or the Department of Health and Family Services. The rates are not tied to an inflationary or cost index and have not been increased since CY 2001, when they were increased by 1%. Wisconsin's rates are significantly below those of other midwestern states. The Department requests the rate increases in order to move closer to the regional average and to enhance support for foster parents in caring for their foster children.

#### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ 818,000		\$ 1,638,400		\$ 2,456,400	
FED	\$ 297,500		\$ 592,300		\$ 889,800	
PR						
PRS						
SEG						
Total	\$ 1,115,500		\$ 2,230,700		\$ 3,346,200	

### **WiSACWIS Reestimate (DIN 5305)**

The Department requests an increase of \$60,800 GPR, and a decrease of (\$2,185,200) FED (changes in Title IV-E funding), (\$71,000) PR (changes in MA-TCM and county payments) and (\$31,300) PRS (federal TANF) in FY06 and a decrease of (\$471,100) GPR, (\$2,166,400) FED (changes in Title IV-E funding), (\$340,100) PR (changes in MA-TCM and county payments) and (\$24,400) PRS (federal TANF) in FY07 to provide ongoing funding for WiSACWIS.

WiSACWIS is the federally mandated, automated child welfare system designed to assist line workers and administrators in managing child welfare services in the areas of intake, assessment, eligibility determination, case management, court processing, financial reporting and administration. The statewide implementation of WiSACWIS was completed in July 2004.

The WiSACWIS reestimate has two cost components, implementation costs and ongoing infrastructure and personnel costs. Projected implementation costs reflect the restructuring of masterlease payments that was undertaken in the current biennium. The ongoing personnel and infrastructure costs of WiSACWIS are funded with federal, state and county funds. Under

current law, the county share of ongoing personnel and infrastructure costs is equal to one-third of the non-federal share. The Department proposes to decrease the county share of these costs to one quarter of the non-federal share, decreasing the county share to \$441,900 in FY06 and \$458,600 in FY07. The ongoing costs of maintaining WiSACWIS in Milwaukee County are reflected in DIN 5302, Milwaukee Child Welfare Reestimate.

### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ 60,800		\$ (471,100)		\$ (410,300)	
FED	\$ (2,185,200)		\$ (2,166,400)		\$ (4,351,600)	
PR	\$ (71,000)		\$ (340,100)		\$ (411,100)	
PRS	\$ (31,300)		\$ (24,400)		\$ (55,700)	
SEG						
Total	\$ (2,226,700)		\$ (3,002,000)		\$ (5,228,700)	

### **State Foster Care and Adoption Assistance Reestimate (DIN 5306)**

The Department requests \$5,559,900 GPR and \$5,630,100 FED in FY06 and \$10,356,900 GPR and \$9,766,400 FED in FY07 for foster care and adoption assistance payments for special needs children. This request reflects a reestimate of funding needs based on projected expenditures in the 2005-07 biennium.

The Department is responsible for special needs children for whom parental rights have been terminated. After termination of parental rights and while awaiting adoption, the children are under the state's guardianship, and the Department pays their out-of-home care costs. The Department is also responsible for special needs adoption assistance payments to the adoptive family once the child is adopted.

The reestimate is based on recent expenditure trends in the program. The total cost of the program has been increasing for several years primarily because of an increase in the number of children in the program. This trend is partly the result of the Department's Special Needs Adoption Partnership. Through the partnership, the Department contracts with private adoption agencies to increase the number of special needs foster children placed in adoptive homes. The partnership is expected to finalize over 1,200 adoptions in CY04.

### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ 5,559,900		\$ 10,356,900		\$ 15,916,800	
FED	\$ 5,630,100		\$ 9,766,400		\$ 15,396,500	
PR						
PRS						
SEG						
Total	\$ 11,190,000		\$ 20,123,300		\$ 31,313,300	

### **Kinship Care Reestimate (DIN 5307)**

The Department requests a decrease of (\$373,800) PRS (federal TANF) in both years of the biennium to fund kinship care payments, assessments, and administration.

Kinship Care is the care of minor children by a relative for which the relative receives a \$215 payment per month per child from a public child welfare agency. The Department administers the program in Milwaukee County as part of the Bureau of Milwaukee Child Welfare (BMCW) and contracts with non-Milwaukee counties and tribes to manage the program in their jurisdiction. The program is funded with federal Temporary Assistance to Needy Families (TANF) revenue. This reestimate is based on actual and projected kinship care caseloads and service expenditures.

#### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR						
FED						
PR						
PRS	\$ (373,800)		\$ (373,800)		\$ (747,600)	
SEG						
Total	\$ (373,800)		\$ (373,800)		\$ (747,600)	

### **Funding for Domestic Abuse Grant Program (DIN 5308)**

The Department requests an increase of \$30,900 PR in FY06 and an increase of \$39,300 PR in FY07 to fund the domestic abuse grant program.

Wisconsin statute s. 973.055 allows for the imposition of an assessment fee for persons convicted for a crime related to domestic abuse. The Department uses the collected fees to support its Domestic Abuse Grant Program. The Department is budgeted \$558,800 in assessment fees per year for domestic abuse programs. 2003 Act 225 increased the domestic abuse assessment fee from \$50 to \$75 per offense. Additionally, assessment fee collections have increased over past years. It is estimated that these factors will generate additional program revenue above the current expenditure level. These funds will be used to support domestic abuse programs across the state in accordance with the Governor's Council on Domestic Abuse's long-range plan.

Under this request, funding for the Domestic Abuse Grant Program will total \$8,072,600 (\$5,070,200 GPR, \$1,662,700 FED (Family Violence Prevention and Services Act), \$750,000 PRS (TANF), \$589,700 PR (assessment fees)) in FY06 and \$8,081,000 (\$5,070,200 GPR, \$1,662,700 FED (Family Violence Prevention and Services Act), \$750,000 PRS (TANF), \$598,100 PR (assessment fees)) in FY07.

## Fiscal Effect Summary

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR						
FED						
PR	\$ 30,900		\$ 39,300		\$ 70,200	
PRS						
SEG						
Total	\$ 30,900		\$ 39,300		\$ 70,200	

### MA Base Reestimate (DIN 5400)

The Department requests an increase in the Medical Assistance (MA) program of \$253,081,200 GPR and a reduction of (\$35,270,900) FED and (\$29,763,600) SEG in FY06 and an increase of \$390,767,900 GPR and \$97,453,200 FED and a reduction of (\$35,763,600) SEG in FY07 to reflect the ongoing cost for the MA program. Total MA expenditures are projected to be \$4,258,054,900 AF (\$1,691,573,700 GPR, \$73,700,000 SEG, \$12,184,700 PR, and \$2,480,596,700 FED) in FY06 and \$4,504,078,600 AF (\$1,825,361,700 GPR, \$67,700,000 SEG, \$12,400,600 PR, and \$2,613,320,800 FED) in FY07.

The requested funding includes \$104.8 million GPR in each year of the biennium due to an imbalance in base funding and the projected level of the cost of services in SFY 2005 after removing one-time costs and savings. The requested funding also includes \$130 million to reflect decreased federal maximization revenue due to the federal government's refusal to approve certain federal revenue maximization initiatives, the sunset of the local government initiative in the 2005-2007 biennium, and a decline in revenue from other initiatives.

The base reestimate adjusts MA base expenditures to account for projected changes in recipient caseloads, service intensity, the federal financial participation matching rate, and costs to continue in various services and programs.

The Department is projecting overall caseload to increase by 6.3% in SFY05, 4.6% in SFY06, and 3.4% in SFY07. It is estimated that caseload changes will cost \$192,816,700 AF (\$87,674,800 GPR) in FY06 and an additional \$139,240,000 AF (\$63,047,600 GPR) in FY07. Projected caseload changes by eligibility group are shown in the table below.

### Annual MA Caseload Changes

	Aged	Disabled	AFDC	Other*	Total
<b>SFY 05</b>	-1.8%	4.0%	9.9%	4.9%	6.3%
<b>SFY 06</b>	-2.3%	3.5%	5.9%	4.8%	4.6%
<b>SFY 07</b>	-2.1%	3.4%	3.4%	4.6%	3.4%

\*The Other eligibility group is comprised mostly of Healthy Start clients.



Intensity is a measurement of the extent to which clients utilize more or less services and the extent to which more or less costly services are delivered. It is estimated that intensity changes to MA will cost \$99,932,500 AF (\$53,234,200 GPR) in FY06 and an additional \$102,732,900 AF (\$49,276,600 GPR) in FY07. The projected increases in drug costs comprise a large portion of the intensity-related increases. Intensity increases due to drugs are \$44,589,600 AF (\$30,200,400 GPR) in FY06 and an additional \$50,926,800 AF (\$34,683,500 GPR) in FY07.

Intensity changes in utilization of services, such as increasing drug costs, affect managed care as well as the fee-for-service system under MA. This reestimate includes capitation rate adjustments to reflect the projected intensity changes in managed care costs so that the discount rate is maintained at current levels. This adjustment is necessary because: (a) federal regulations require that capitation rates be actuarially sound; and (b) rising discount rates may jeopardize continued participation by HMOs. Managed care programs provide a less expensive alternative to MA fee-for-service because capitation rates are set at a discount rate from the fee-for-service equivalent.

The federal financial participation (FFP) rate is projected to decrease in the 2005-2007 biennium. Wisconsin's federal reimbursement rate is projected to decrease from 58.34% in SFY05 to 57.80% in SFY06 and 57.38% in SFY07. This decline in the FFP rate is projected to increase GPR costs in the 2005-2007 biennium by \$62.4 million GPR.

### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ 253,081,200		\$ 390,767,900		\$ 643,849,100	
FED	\$ (35,270,900)		\$ 97,453,200		\$ 62,182,300	
PR						
PRS						
SEG	\$ (29,763,600)		\$ (35,763,600)		\$ (65,527,200)	
Total	\$ 188,046,700		\$ 452,457,500		\$ 640,504,200	

### **BadgerCare Reestimate (DIN 5401)**

The Department requests a reduction of (\$2,246,500) GPR, (\$15,531,700) FED and (\$2,451,400) PR in FY06 and an increase of \$18,225,300 GPR and \$59,100 FED and a reduction of (\$1,770,800) PR in FY07 to support the continued operation of the BadgerCare program. It is projected that BadgerCare expenditures will total \$196,329,900 AF (\$66,090,300 GPR, \$123,736,700 FED and \$6,502,900 PR) in FY06 and \$233,073,000 AF (\$86,562,100 GPR, \$139,327,500 FED and \$7,183,500 PR) in FY07.

The BadgerCare program is a health insurance program for uninsured low-income families. Uninsured families with dependent children who are not eligible for Medical Assistance (MA) qualify for coverage under BadgerCare if the family's income is below 185% of the federal poverty level (FPL). Families who begin participating in the program when the family's income is less than 185% of the FPL remain eligible until the family's income exceeds 200% of the FPL.

BadgerCare enrollment has experienced significant declines of enrollment in the most recent months. Enrollments declined by 1,282 in May, by 2,651 in June, by 4,959 in July and by 4,120 in August 2004. This trend is projected to continue through the third quarter of FY05. Average monthly caseload is projected to decrease from 113,002 in FY04 to 95,704 in FY05. It is expected that enrollment will resume growth after FY05, and monthly enrollment is projected to rise to 96,182 in FY06 and 104,165 in FY07.

The requested decreases for PR reflect estimated decreases in premium collections from the decline in the number of BadgerCare enrollees.

Intensity is a measurement of the extent to which clients utilize more or less services and the extent to which more or less costly services are delivered. It is assumed that intensity will increase at an annual rate of 2.5% for children and 5.2% for adults in the fee-for-service area. Capitation rates are adjusted on a calendar basis by a blended 4.5% annual rate for intensity changes in managed care. An intensity adjustment is necessary for managed care since: (a) federal regulations require that capitation rates are actuarially sound; and (b) rising discount rates may jeopardize continued participation by HMOs. Managed care programs provide a less expensive alternative to MA fee-for-service since capitation rates are set at a discount rate from the fee-for-service equivalent.

The GPR request for FY07 includes \$11.0 million for a federal penalty payment related to violating the cost neutrality requirement in the first BadgerCare 5-year waiver period, which ended on June 30, 2004. While the federal penalty was incurred in 1999-2004, it must be paid in the 05-07 biennium, specifically by September 30, 2006. The Department successfully negotiated a higher cost neutrality limit for the current waiver period.

### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ (2,246,500)		\$ 18,225,300		\$ 15,978,800	
FED	\$ (15,531,700)		\$ 59,100		\$ (15,472,600)	
PR	\$ (2,451,400)		\$ (1,770,800)		\$ (4,222,200)	
PRS						
SEG						
Total	\$ (20,229,600)		\$ 16,513,600		\$ (3,716,000)	

### **SeniorCare Reestimate (DIN 5402)**

The Department requests \$19,610,600 GPR, \$15,776,800 FED and \$4,030,600 PR in FY06 and \$28,427,500 GPR, \$22,007,900 FED, and \$9,497,800 PR in FY07 to support the continued operation of the SeniorCare program.

SeniorCare provides prescription drug assistance to Wisconsin residents over 65 years of age whose income does not exceed 240% of the Federal Poverty Level (FPL) and to those whose income exceeds 240% of the FPL if their prescription drug expenditures bring their net income below the 240% limit (termed spenddown). Participants in SeniorCare are required to pay an annual \$30 enrollment fee and co-payments of \$15 for each name brand drug and \$5 for each

generic drug. Also, participants with incomes over 160% of the FPL are subject to a deductible of \$500 (160% to 200% of the FPL) or \$850 (200% to 240% of the FPL) before SeniorCare will reimburse a participant's prescription drug expenditures.

SeniorCare enrollment is projected to increase at an annual rate of 2% until January 1, 2006 which would increase average monthly enrollment from 88,932 in FY04 to 91,497 in FY05 and to 92,890 in FY06. Because of the implementation of Part D drug coverage under Medicare beginning on January 1, 2006, it is projected that 6,000 SeniorCare participants will choose to enroll in Medicare Part D, rather than remain in SeniorCare. For certain persons with income below 135% of the FPL, Medicare Part D coverage has lower copayments than SeniorCare. Due to this projected movement of clients to the new Medicare program, SeniorCare monthly enrollment is projected to decline to an average of 91,226 in FY07.

The projection assumes that the combined effect of drug inflation and utilization of drugs will cause the average cost of drug expenditures per participant to increase by 12% annually in FY06 and FY07. Since copayment levels and deductibles are assumed to remain at current levels, the 12% drug inflation/utilization increase will increase state costs per participant by 16.9% in FY06 and 17.1% in FY07.

### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ 19,610,600		\$ 28,427,500		\$ 48,038,100	
FED	\$ 15,776,800		\$ 22,007,900		\$ 37,784,700	
PR	\$ 4,030,600		\$ 9,497,800		\$ 13,528,400	
PRS						
SEG						
Total	\$ 39,418,000		\$ 59,933,200		\$ 99,351,200	

### **MA Contracts Reestimate (DIN 5403)**

The Department requests \$3,300,000 GPR and \$25,052,900 FED in FY06 and \$4,824,600 GPR and \$23,686,800 FED in FY07 to fund the projected costs of MA contracts and the Client Assistance for Re-employment and Economic Support (CARES) eligibility determination system. In addition, the Department requests the transfer of \$5,813,700 GPR and \$5,813,700 FED from the Division of Health Care Finance's general operations appropriations (s. 20.435(4)(a) & (4)(n)) to the MA contracts appropriation (numerics 412 and 454 under appropriations s. 20.435(4)(bm) & (4)(pa)) to consolidate funding for contracts in one appropriation.

The Wisconsin Medical Assistance program utilizes numerous contracts and agreements for the administration of the Medicaid program. These contracts are funded with GPR and matching federal MA administration funds. The rate of federal match differs between contracts and is contingent upon the type of service that the contract provides. The largest component of these contracts is the contract with the state's fiscal agent that operates the Medicaid Management and Information System (MMIS). Expenditures for the fiscal agent contract totaled \$54,959,800 AF (\$21,081,400 GPR) in FY04. The Department is in the process of re-bidding the fiscal agent

contract. The Department is projecting significant savings in the fiscal agent operating costs due to the re-bidding process.

The next largest contract is for the CARES system which cost \$33,110,031 AF (\$15,907,800 GPR) in FY04. The CARES system determines eligibility for MA, BadgerCare, SSI Caretaker Supplement, FamilyCare, and SeniorCare. Another large contract is for Food Stamps electronic benefit transfers. Annual costs for CARES and Food Stamp administration are projected to increase in FY05, FY06 and FY07 due to rising caseloads and other factors.

This request includes a number of cost-saving measures the Department plans to undertake, including: (a) master leasing the costs for the new fiscal agent implementation; (b) negotiating a reduction in fiscal agent costs of \$0.7 million GPR in the biennium due to the shift of 60% of drug claims to the new Medicare Part D drug program; and (c) achieving savings of \$1.2 million GPR in FY07 based on efficiencies from a new fiscal agent system.

Costs for implementing the new fiscal agent contract is supported by 90% federal matching funding, which is the major reason for the large request for federal funds in FY06 and FY07. Implementation costs are estimated to total \$20,000,000 per year, with annual federal matching funds of \$18,000,000.

### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ 3,300,000		\$ 4,824,600		\$ 8,124,600	
FED	\$ 25,052,900		\$ 23,686,800		\$ 48,739,700	
PR						
PRS						
SEG						
Total	\$ 28,352,900		\$ 28,511,400		\$ 56,864,300	

### **Disease Aids Reestimate (DIN 5404)**

The Department requests a reduction of (\$367,500) GPR in FY06 and an increase of \$40,600 GPR in FY07 in the Disease Aids program. The Disease Aids appropriation funds the Wisconsin Chronic Diseases Program (WCDP), which provides payments for chronic renal disease, adult cystic fibrosis and hemophilia home care supplies. Disease Aids is the payer of last resort for these programs.

As a condition of having their drugs available for purchase under WCDP, drug manufacturers are required to enter into rebate agreements with the state. Revenues from this program are used to offset a portion of the program's costs. New provisions took effect in July 2004 which are expected to further limit expenditures in the Chronic Disease program. This legislation increased the percentage of income which program participants are required to pay towards medical treatment for their disease before becoming eligible for WCDP. The legislation also increased the amount of the annual deductible which participants are required to pay towards medical costs. In addition, potential clients of this program are required to apply for other

government health insurance programs, including Medicaid and SeniorCare, before applying for assistance from the Disease Aids program.

Caseloads and expenditures are anticipated to continue growing in all three Disease Aids programs but will be offset by the legislative changes made in the WCDP program. For FY06 and FY07, inflation increases used in the Medicaid program to project different categories of medical costs, including drug and physician costs, have been applied to FY05 estimated expenditures. This projected increase has been adjusted to take into consideration the estimated drug rebate revenue and program changes.

### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ (367,500)		\$ 40,600		\$ (326,900)	
FED						
PR						
PRS						
SEG						
Total	\$ (367,500)		\$ 40,600		\$ (326,900)	

### **HIRSP Reestimate (DIN 5405)**

The Department requests a reduction of (\$31,667,000) SEG in SFY06 and an increase of \$754,600 SEG in SFY07 to support the estimated costs of the HIRSP program. These adjustments will result in total HIRSP appropriations of \$160,839,600 SEG in SFY06 and \$193,261,300 SEG in SFY07, of which \$6,836,100 SEG in SFY06 and \$7,090,500 in SFY07 is to fund HIRSP administration.

Created by the Legislature in 1980, the Health Insurance Risk-Sharing Plan (HIRSP) provides major medical health insurance coverage to Wisconsin residents who are either unable to find adequate health insurance coverage in the private market due to their medical conditions or have lost their employer-sponsored group health insurance. Excluding the premium and deductible subsidies for low-income policyholders, the expenses of the plan are distributed 60% to policyholders, 20% to insurance companies and 20% to providers. The premium and deductible subsidies are funded 50% by insurers and 50% by providers.

The request reduces the benefits appropriation by (\$33,461,700) SEG in SFY06 and by (\$1,294,500) in SFY07. The request reduces funding to reflect recent caseload growth, which has been lower than projected in the last biennial budget. HIRSP benefit expenditures in SFY05 are projected to be \$128,613,600 SEG. The SFY06 and SFY07 projections assume per member per month medical costs will increase by 6% each year and per member per month prescription drug costs will increase by 19% each year. The annual enrollment is projected to increase by 8.3% in both SFY06 and SFY07. These assumptions are consistent with the assumptions used in establishing the SFY05 HIRSP budget.

The estimated administrative increase is \$1,794,700 SEG in SFY06 and \$2,049,136 SEG in SFY07. HIRSP administrative costs include expenses for plan administration, policy

management, actuarial services, department administration, medical consultants, postage costs, and legal and referral fees. The HIRSP program is in the process of procuring a new plan administrator. The SFY06 and SFY07 HIRSP administration estimate is based on the cost proposals submitted in the procurement process for the new plan administrator.

### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR						
FED						
PR						
PRS						
SEG	\$ (31,667,000)		\$ 754,600		\$ (30,912,400)	
Total	\$ (31,667,000)		\$ 754,600		\$ (30,912,400)	

### **Eligibility Quality Assurance (DIN 5410)**

The Department requests a reduction of (\$1,470,700) GPR and an increase of 3.5 GPR FTE, a reduction of (\$2,635,300) FED and an increase of 3.5 FED FTE and an increase of \$14,400 PRS (federal TANF) in SFY06 and a reduction of (\$5,662,100) GPR and an increase of 3.5 GPR FTE, a reduction of (\$9,038,100) FED and an increase of 3.5 FED FTE and an increase of \$42,200 PRS (federal TANF) in SFY07 to reflect the implementation of an eligibility quality assurance program. Implementing a quality assurance program will reduce eligibility determination errors, which can result in eligible individuals being denied benefits and ineligible individuals receiving benefits. The proposal includes:

- Implementing state quality control reviews to monitor error rate trends and determine the causes of errors.
- Implementing local agency second party reviews to seek to identify errors before eligibility is determined, assess the types of errors being made and which eligibility workers are making them.
- Providing technical assistance and training to implement corrective actions based on the findings of the quality control reviews.
- Implementing eligibility verification for SeniorCare to ensure that only eligible individuals are certified at the correct participation level.
- Increasing the data resources used to verify eligibility.
- Amending the statutes to allow eligibility workers to request verification of information.

It is projected that implementing the above quality assurance initiatives will generate savings of \$7,347,900 AF (\$3,111,500 GPR) in SFY06 and \$20,928,000 AF (\$8,835,500 GPR) in FY07. In order to implement these proposals the Department will require 7.0 FTEs and \$1,978,500 AF (\$989,300 GPR) in FY06 and \$2,429,300 AF (\$1,214,700 GPR) in FY07 in operations funding.

In addition, \$1,277,700 AF (\$651,600 GPR) in SFY06 and \$3,840,500 AF (\$1,958,700 GPR) in SFY07 will be used to increase funding for the state's income maintenance (IM) contracts with counties and tribes. Under state law, the Department contracts with county human and social services departments and tribes to perform eligibility functions for income maintenance

programs. In the current and most recent past biennia, there have been no increases for county and tribal IM contracts. During the same period, IM caseloads have risen significantly. The lack of increased IM funding and the rising caseloads increase the likelihood of eligibility determination errors. Allocating a portion of the savings from this proposal for IM funding is necessary to prevent deterioration of the county eligibility determination system and to achieve the goals of this initiative.

The income maintenance funding will be allocated to counties based on the principles of the funding model developed by the Income Maintenance Advisory Committee. The new funding model takes account of the caseload projections prepared as part of the cost-to-continue calculations for the biennial budget for Medicaid and Food Stamp program benefits and the work associated with different IM case configurations.

### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ (1,470,700)	3.50	\$ (5,662,100)	3.50	\$ (7,132,800)	3.50
FED	\$ (2,635,300)	3.50	\$ (9,038,100)	3.50	\$ (11,673,400)	3.50
PR						
PRS	\$ 14,400		\$ 42,200		\$ 56,600	
SEG						
Total	\$ (4,091,600)	7.00	\$ (14,658,000)	7.00	\$ (18,749,600)	7.00

### **Transportation Broker (DIN 5411)**

The Department requests \$26,200 GPR and \$26,200 FED in FY06 and a reduction of (\$2,524,400) GPR and (\$2,953,900) FED in FY07 to implement a transportation management (broker) program for Medical Assistance recipients. The request consists of \$26,200 GPR and \$26,200 FED in FY06 and \$30,400 GPR and \$30,400 FED in FY07 to contract for a program manager for the transportation broker initiative and (\$2,554,800) GPR and (\$2,984,300) FED in FY07 in benefit savings to the Medicaid (MA) program.

Wisconsin Medicaid covers non-emergency medical transportation provided by common carriers and specialized medical vehicles (SMVs). Services vary across the state, depending on locality, and transportation services are often subject to fraud. Other states have reported successfully reducing MA costs by using transportation brokers. Brokers typically provide a single point of contact for recipients, centralizing vehicle dispatch, record keeping, vehicle maintenance, and other functions under contractual arrangements with agencies, municipalities, and other organizations. Some brokerage systems also enroll and reimburse providers, oversee quality assurance, and coordinate with state transit agencies and other human services agencies. Actual transportation may be provided by the broker or subcontracted to a number of different vendors. Cost savings result from more efficient allocation of resources, including shared ridership and improved provider dispatching, a reduction in administrative costs, and a reduction in fraud. The Department will seek a freedom-of-choice transportation waiver from the federal government as part of this initiative. The Department anticipates that the transition to a transportation broker will require significant pre-implementation planning and is requesting funding to contract for a program manager for this initiative. The program manager will meet

with stakeholders, obtain federal waiver approval, issue an RFP, engage in contract negotiations, and notify providers and recipients, among other activities.

### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ 26,200		\$ (2,524,400)		\$ (2,498,200)	
FED	\$ 26,200		\$ (2,953,900)		\$ (2,927,700)	
PR						
PRS						
SEG						
Total	\$ 52,400		\$ (5,478,300)		\$ (5,425,900)	

### **Emergency Room Utilization (DIN 5412)**

The Department requests a reduction of (\$300,600) GPR and (\$499,000) FED in FY06 and (\$297,100) GPR and (\$495,500) FED in FY07 to reflect the adoption of disease management techniques to address the issue of over-utilization of emergency room treatment by Medical Assistance (MA) clients. This request consists of administrative costs of \$96,200 GPR and \$96,200 FED in FY06 and \$99,700 GPR and \$99,700 FED in FY07 for a case manager and for the design and implementation of a data base for the case management of high ER users. The request includes a reduction of (\$396,800) GPR and (\$595,200) FED in MA benefit expenditures in both years of the biennium as a result of reduced use of Emergency Rooms (ER) in the Medicaid program.

The Department proposes to use disease management initiatives that direct high emergency room users toward more appropriate primary care and away from reliance on the emergency room system. Disease management procedures are designed to ensure that patients receive appropriate care at the appropriate time and that their medical condition is monitored to ensure that they are not forced to rely on emergency rooms for medical care. The Department is projecting reductions in ER and inpatient hospital use, and an increase in physicians' office visits expenditures, that will result in a net reduction in overall expenditures. The Department proposes to contract for an ER care coordinator, who will provide the staff support required to implement care management techniques which will lead to better ER utilization and more direct disease management for high ER users. The ER coordinator will establish a database to provide ER providers with timely information about those who excessively use the ER and work collaboratively with care providers to develop disease and care management plans for high ER users.



## Fiscal Effect Summary

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ (300,600)		\$ (297,100)		\$ (597,700)	
FED	\$ (499,000)		\$ (495,500)		\$ (994,500)	
PR						
PRS						
SEG						
Total	\$ (799,600)		\$ (792,600)		\$ (1,592,200)	

### Eliminate Physician Prescription Requirement for MH Services (DIN 5413)

The Department requests a reduction of (\$5,500) GPR and (\$7,500) FED in both years of the biennium to reflect the repeal of the requirement that mental health and substance abuse services for Medicaid recipients must be authorized by a physician's prescription.

Under current state law, a physician's prescription is required for Medicaid payment of mental health and substance abuse services. Federal law does not require a physician's prescription for Medicaid payment for these services. The Department's certification process for psychosocial rehabilitation programs and other mental health services does not require that the programs obtain a physician's prescription in order to provide these services.

This proposal amends state law to allow individuals to receive mental health and substance abuse services based on the recommendation of a physician or licensed mental health professional. Statutes would provide that the Department specify in administrative rule the list of licensed mental health professionals who would have the authority to make this recommendation. This change would be consistent with current state certification standards for mental health and substance abuse services and with federal regulations. This change is supported by professional healthcare associations and advocacy groups. Removing this requirement will create a small amount of benefit savings for the Medicaid program and will reduce the regulatory burden on providers.

## Fiscal Effect Summary

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ (5,500)		\$ (5,500)		\$ (11,000)	
FED	\$ (7,500)		\$ (7,500)		\$ (15,000)	
PR						
PRS						
SEG						
Total	\$ (13,000)		\$ (13,000)		\$ (26,000)	

### **Expansion of SSI Managed Care (DIN 5420)**

The Department requests a reduction of (\$1,359,100) GPR and (\$1,861,400) FED in FY06 and a reduction of (\$3,957,500) GPR and (\$5,328,000) FED in FY07 to reflect the impact of expanding the SSI Managed Care program in Milwaukee County and to a number of other areas in the state.

The Department supports the increased use of managed care in the MA program to achieve more effective coordination and delivery of care, better health outcomes, and more efficient use of resources. SSI adults with disabilities residing in the community are a high cost fee-for-service (FFS) population in the MA program. A significant portion of the FFS costs is due to the use of inpatient hospital services, emergency room services and outpatient hospital services for preventable conditions. The cost for these preventable conditions can, in part, be attributed to a lack of access to providers, non-compliance with treatment, and a lack of funding for alternative supports. Implementation of a managed care system for SSI adults with disabilities will provide improved care coordination, improved provider access, and more effective patient treatment.

The projected savings is based on the assumptions that: expansion of SSI managed care will begin to be phased-in in Milwaukee and Dane counties in January-April; that the Marshfield Clinic will begin in the summer of 2005 a modified care management program in the 28 county area served by the clinic; and that there will be further expansions in FY06 of SSI managed care to LaCrosse county, Southeast Wisconsin and the Fox Cities.

#### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ (1,359,100)		\$ (3,957,500)		\$ (5,316,600)	
FED	\$ (1,861,400)		\$ (5,328,000)		\$ (7,189,400)	
PR						
PRS						
SEG						
Total	\$ (3,220,500)		\$ (9,285,500)		\$ (12,506,000)	

### **MA Coverage for Youths Leaving Out-of-Home Care (DIN 5421)**

The Department requests \$374,100 GPR and \$463,900 FED in FY06 and \$1,085,800 GPR and \$1,476,100 FED in FY07 to phase in an expansion of MA eligibility to youths who age out of out-of-home care. Under this proposal, starting January 1, 2006 MA coverage would be expanded to all eligible youths who are 18 or 19, and coverage would be further expanded to include 20 year olds in FY07.

Children and youths in out-of-home care have higher than average health care needs particularly in the areas of mental health, chronic recurrent diseases and substance abuse. These needs, which continue and may intensify into adulthood, are unmet when the youths leave out-of-home care, turn 19 and lose MA. The Chafee Foster Care Independence Act of 1999 allows states to claim federal MA matching funds to support health care under MA for these youths through age

20. Extended MA eligibility could reduce future health care costs by limiting breaks in health care coverage, increasing preventative care and maintaining treatment regimens for chronic conditions. Additionally, extended MA eligibility could reduce long-term social costs by addressing mental health and substance abuse issues before complications from these health problems negatively affect family relationships, productivity and personal achievement.

### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ 374,100		\$ 1,085,800		\$ 1,459,900	
FED	\$ 463,900		\$ 1,476,100		\$ 1,940,000	
PR						
PRS						
SEG						
Total	\$ 838,000		\$ 2,561,900		\$ 3,399,900	

### **Prenatal Care for Non-qualified Immigrant Women (DIN 5422)**

The Department requests a decrease of (\$306,600) GPR and an increase of \$638,600 FED in FY06 and a decrease of (\$408,800) GPR and an increase of \$851,500 FED in FY07 to provide prenatal care for non-qualified pregnant immigrant women. This is the net effect of reducing Medical Assistance funding by (\$1,338,800) GPR and (\$1,875,000) FED in FY06 and by (\$1,785,000) GPR and (\$2,500,000) FED in FY07 and increasing Badger Care funding by \$1,032,200 GPR and \$2,513,600 FED in FY06 and by \$1,376,200 GPR and \$3,351,500 FED in FY07.

Prenatal care reduces the likelihood of premature delivery and low birth weight, detects many serious and life-threatening disabilities, and affects infant mortality and morbidity rates. Additionally, prenatal care provides women with information they can use to keep themselves and their fetus healthy and allows medical providers an opportunity to monitor the health of the mother and fetus and medically intervene as necessary. Without this information, women may not be aware of behaviors they could modify to increase the likelihood of having a healthy child.

Federal regulations under the State Child Health Insurance Program (SCHIP) allow states the option to cover the fetus of a pregnant woman at an enhanced federal reimbursement rate. This proposal will expand prenatal care services to women who are not eligible for full MA services, but whose children, if born, would be eligible for Badger Care benefits. In Wisconsin, these women would include low-income, pregnant, non-qualifying immigrants who currently only qualify for emergency MA services.

## Fiscal Effect Summary

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ (306,600)		\$ (408,800)		\$ (715,400)	
FED	\$ 638,600		\$ 851,500		\$ 1,490,100	
PR						
PRS						
SEG						
Total	\$ 332,000		\$ 442,700		\$ 774,700	

### HIRSP Eligibility of Individuals Receiving Limited MA Benefits (DIN 5441)

The Department requests an increase of \$600 GPR, \$1,000 FED and \$52,500 SEG in both years of the biennium to reflect statutory changes to allow individuals receiving limited MA benefits to be eligible for HIRSP if they meet the other HIRSP eligibility criteria and to make individuals that receive full benefits under BadgerCare or other programs ineligible for HIRSP.

Traditional Medical Assistance provides comprehensive health care coverage for certain needy and low-income individuals and families. Certain criteria must be met for individuals to be eligible to receive general Medical Assistance benefits. In addition to the traditional Medical Assistance program, there are several special sub-programs under Medical Assistance that provide limited benefits to individuals who do not meet all the regular MA eligibility requirements. Although these sub-programs are classified under Medical Assistance, recipients do not receive complete medical coverage.

Currently, according to the HIRSP statutes, no person eligible for Medical Assistance (MA) is eligible for HIRSP. This proposal would allow individuals that qualify for limited MA benefits and SeniorCare to be able to participate in the HIRSP program if they meet the other HIRSP eligibility criteria. It would also prohibit individuals eligible for BadgerCare, COP-Waiver, CIP-II, CIP-I, Brain Injury Waiver, and Children Long Term Support Waivers to become HIRSP eligible since they receive full health care benefits.

## Fiscal Effect Summary

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ 600		\$ 600		\$ 1,200	
FED	\$ 1,000		\$ 1,000		\$ 2,000	
PR						
PRS						
SEG	\$ 52,500		\$ 52,500		\$ 105,000	
Total	\$ 54,100		\$ 54,100		\$ 108,200	

## HIRSP Pharmacy Reform (DIN 5442)

The Department requests a reduction of (\$1,299,100) SEG in SFY06 and (\$3,071,400) SEG in SFY07 to reflect the savings associated with adopting a tiered pharmacy benefit and eliminating the requirement that the HIRSP reimbursement be equal to the Medicaid rate.

Currently, all three HIRSP plans require policyholders to pay a coinsurance of 20% of the allowed costs up to \$25 per prescription. The coinsurance is subject to out-of-pocket maximums of \$750 per year for Plan 1A, \$1,000 per year for Plan 1B, and \$125 per year for Plan 2.

Beginning January 1, 2004, the Department of Employee Trust Fund (ETF) implemented a three-level "tiered" co-payment structure for pharmacy benefits. Recipients are required to pay \$5 for drugs classified in level 1, \$15 for drugs classified in level 2, and \$35 for drugs classified in level 3. In addition, the ETF plan also has an annual out-of-pocket maximum of \$300 for level 1 and level 2 prescription drugs. There is no out-of-pocket maximum for level 3 copayments.

The Department proposes to restructure HIRSP's pharmacy drug coverage to a model similar to the Wisconsin State employee multi-tiered drug benefit plan. As part of this proposal, the Department is requesting statutory changes to require that the out-of-pocket maximum for drugs be \$300 for Plan 1A and Plan 2, and \$400 for Plan 1B. The Department is also requesting that all three HIRSP plans have a three-level copayment structure for pharmacy benefits, with HIRSP policyholders paying \$5, \$15, and \$35 for most generic and brand name drugs. The out-of-pocket maximums would only apply to drugs at the \$5 and \$15 copayment levels. The copayments and out-of-pocket maximums could be changed by administrative rule.

In addition, it is proposed that the statutory provision requiring HIRSP to have the same payment rates as Medicaid be eliminated. Under current statutes, it is required that the HIRSP payment rates for prescription drugs be the allowable charge paid by the Medicaid program. In FY05 the MA rate is the average wholesale price (AWP) minus 13% for brand-name drugs or a Maximum Allowed Cost (MAC) for generics. In addition to the cost of the drug, there is a dispensing fee of \$4.38 per prescription. It is estimated that if HIRSP negotiated drug prices similar to private rates the program could achieve cost savings.

### Fiscal Effect Summary

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR						
FED						
PR						
PRS						
SEG	\$ (1,299,100)		\$ (3,071,400)		\$ (4,370,500)	
Total	\$ (1,299,100)		\$ (3,071,400)		\$ (4,370,500)	

### **HIRSP Plan 2 Deductible (DIN 5443)**

The Department requests a reduction of (\$222,900) SEG in SFY06 and (\$482,800) SEG in SFY07 to reflect changing the HIRSP Plan 2 deductible from \$500 per year to the Medicare Part A deductible.

Currently, statutes require that the deductible for HIRSP enrollees eligible for Medicare (Plan 2) shall be equal to the Medicare Part A deductible. In CY04 the Medicare Part A deductible equals \$876. The statutes also require that if the aggregate covered medical expenses not paid by the plan exceed \$500 for eligible individuals receiving Medicare, the plan shall pay 100% of all covered cost incurred by the enrollee. The two statutory provisions are inconsistent since the Part A deductible exceeds \$500. The Department proposes that the statutes be amended to require that the maximum medical out-of-pocket costs for individuals eligible for Medicare shall be equal to Medicare Part A deductible in the year that the Plan 2 rates are established.

#### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR						
FED						
PR						
PRS						
SEG	\$ (222,900)		\$ (482,800)		\$ (705,700)	
Total	\$ (222,900)		\$ (482,800)		\$ (705,700)	

### **Cemetery, Funeral, and Burial Aids Program (DIN 5451)**

The Department requests the current funding level of \$4,550,200 GPR for the cemetery, funeral, and burial aids program be transferred from the income maintenance appropriation, to a newly established appropriation and that the statutorily-set limits for funeral, burial and cemetery expenses be reduced as follows: (a) from \$1,500 to \$1,150 for funeral and burial expenses; and (b) from \$1,000 to \$750 for cemetery expenses.

Under current statute, for certain public assistance recipients, counties and tribal governing bodies are required to pay up to \$1,000 for cemetery expenses and up to \$1,500 for funeral and burial expenses when the estate does not have sufficient funding. The county is not required to pay for any cemetery expenses if the total cemetery expense exceeds \$3,500. Also, the county is not required to pay for any funerals and burials if the total funeral and burial expenses exceed \$3,500. The Department is required to reimburse the counties and tribal governing bodies for all of their required costs under the statute. These expenses are 100% GPR-funded.

The base funding is not sufficient to cover the cost of the program. In order to contain expenditures within the base funding level, the Department proposes reducing the funeral and burial reimbursement to \$1,150 and the cemetery reimbursement to \$500.

### Fiscal Effect Summary

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ -		\$ -		\$ -	
FED						
PR						
PRS						
SEG						
Total	\$ -	-	\$ -	-	\$ -	-

### Changing the Medicaid 'Grace Month' Policy (DIN 5460)

The Department requests a decrease of (\$1,275,600) GPR and (\$1,949,700) FED in FY06 and (\$1,523,900) GPR and (\$2,171,400) FED in FY07 to revise the Medicaid "grace month" policies so that eligibility is terminated at the end of the twelve-month benefit period. This funding change consists of: the reduction in (\$1,335,400) GPR and (\$1,829,000) FED in FY06 and (\$1,348,700) GPR and (\$1,815,700) FED in FY07; the reduction of BadgerCare funding by (\$175,200) GPR and (\$355,700) FED in FY06 and (\$175,200) GPR and (\$355,700) FED in FY07 and an increase of \$470,000 (\$235,000 GPR and \$235,000 FED) in FY06 to (a) change CARES/Medicaid Management Information System (MMIS); and (b) develop a pre-printed, mail-in Medicaid review form that would be automatically generated with notification to the recipient that an eligibility review is due. This proposal will terminate eligibility for Medicaid and BadgerCare clients who lose eligibility for the programs at the end of twelve, rather than, thirteen months. This proposal is consistent with federal regulations.

### Fiscal Effect Summary

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ (1,275,600)		\$ (1,523,900)		\$ (2,799,500)	
FED	\$ (1,949,700)		\$ (2,171,400)		\$ (4,121,100)	
PR						
PRS						
SEG						
Total	\$ (3,225,300)		\$ (3,695,300)		\$ (6,920,600)	

### Medical Assistance Services for Children in RCCs (DIN 5461)

The Department requests a decrease of (\$23,424,300) GPR, an increase of \$7,586,300 FED and \$23,424,300 SEG in FY06 and a decrease of (\$23,424,300) GPR, an increase of \$5,057,500 FED and \$23,424,300 SEG in FY07 to implement an initiative to claim and use federal Medicaid revenues for services provided in residential care centers (RCCs).

RCCs are licensed child welfare agencies that provide residential and treatment services to children, youth, and young adults. Most children in RCCs are under the care of counties or (in Milwaukee County) the Bureau of Milwaukee Child Welfare (BMCW).

The Department has developed a mechanism to claim federal Medicaid funds for certain treatment services provided in RCCs beginning in FY05. The initiative will make available an estimated \$59,492,400 FED in additional revenue in the 2005-2007 biennium. The Department requests authority to allocate \$7,586,300 FED in FY06 and \$5,057,500 FED in FY07 to counties and BMCW to fund rate increases by RCCs to cover costs of implementing the initiative. DHFS requests that the remainder of the new revenues, \$23,424,300 per year in FY06 and FY07, be allocated to the MA Trust Fund to fund the non federal share of MA benefits in the 2005-2007 biennium, thereby generating an equivalent amount of GPR savings.

### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ (23,424,300)		\$ (23,424,300)		\$ (46,848,600)	
FED	\$ 7,586,300		\$ 5,057,500		\$ 12,643,800	
PR						
PRS						
SEG	\$ 23,424,300		\$ 23,424,300		\$ 46,848,600	
Total	\$ 7,586,300		\$ 5,057,500		\$ 12,643,800	

### **Medical Assistance Purchase Plan Premium Change (DIN 5462)**

The Department requests a decrease of (\$45,600) GPR in FY06 and a decrease of (\$91,300) GPR in FY07 and statutory changes to increase the premium for Medical Assistance Purchase Plan (MAPP) participants from 3% to 5% of earned income.

MAPP assists individuals with disabilities to enter the workforce by allowing them to maintain MA eligibility while earning more income through work. Under current law, participants who have income above 150% of the federal poverty level must pay a premium of 3% of earned income and 100% of unearned income, after taking account of certain exemptions. The proposed change would make the MAPP premium consistent with the premium for BadgerCare, the state's health insurance program for low income working families. The BadgerCare premium is 5% of income for families above 150% of the federal poverty level.



## Fiscal Effect Summary

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ (45,600)		\$ (91,300)		\$ (136,900)	
FED						
PR						
PRS						
SEG						
Total	\$ (45,600)		\$ (91,300)		\$ (136,900)	

## Spousal Support For Individuals Receiving Long Term Care Services (DIN 5463)

The Department requests a reduction of (\$86,000) GPR and (\$117,800) FED in SFY06 and a reduction of (\$532,600) GPR and (\$719,300) FED in SFY07 to reflect the savings from strengthening statutory provisions that allow county corporation counsels to pursue support payments from a community spouse to assist in paying for the needs of an institutionalized spouse.

To become eligible for Medicaid nursing home or community based waiver services, individuals must meet asset and income requirements. When an individual is married and applies for these services, the assets of the couple and the income of the applicant are considered to determine eligibility. A community spouse can have a high income and the applicant can still become eligible for publicly-funded Medicaid nursing home and community waiver services.

Under current statute, the Department has the authority to require a community spouse to contribute towards the cost of long-term care. The Department is proposing statutory changes to strengthen the spousal support requirements. Situations where corporation counsel would pursue support would include when the community spouse has income that is sufficient to meet his/her needs, but the institutionalized spouse does not have enough income to pay for private care in a nursing home. If the counties pursued support in cases such as these, some MA clients could pay for some or all of the care that is now supported with public funding.

## Fiscal Effect Summary

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ (86,000)		\$ (532,600)		\$ (618,600)	
FED	\$ (117,800)		\$ (719,300)		\$ (837,100)	
PR						
PRS						
SEG						
Total	\$ (203,800)		\$ (1,251,900)		\$ (1,455,700)	

### **Estate Recovery for the PACE and Partnership Programs (DIN 5464)**

The Department requests a reduction of (\$12,600) GPR and (\$17,300) FED and an increase of \$29,900 PR in SFY06 and a reduction of (\$59,400) GPR, (\$79,900) FED and an increase of \$139,300 PR in SFY07 to reflect the savings associated with applying estate recovery provisions to the PACE and Partnership programs and changing the methodology for estate recovery under Family Care.

Through the Medicaid Estate Recovery Program (ERP) the state seeks repayment of certain long-term care Medicaid benefits provided to recipients. This includes recipients residing in nursing homes and those participating in home and community-based waiver programs including Family Care. Recoveries are made from the estates of recipients and from liens placed on homes. The recovered funds are returned to the Medicaid Program.

The Program for All-inclusive Care for the Elderly (PACE) and the Wisconsin Partnership Program (Partnership) are managed care programs that provide both acute health and long term care services to elderly and disabled individuals who are eligible for nursing home care. Inclusion of the PACE and Partnership programs into estate recovery would create a consistent and equitable application of estate recovery to all MA clients who receive long-term care.

To comply with federal requirements, the Department plans to base estate recoveries for PACE/Partnership on the portion of the capitation related to long term care and other services that are subject to estate recovery in the waiver programs. To comply with federal requirements and be consistent across programs, the Department plans to revise the Family Care estate recovery to this same methodology.

#### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ (12,600)		\$ (59,400)		\$ (72,000)	
FED	\$ (17,300)		\$ (79,900)		\$ (97,200)	
PR	\$ 29,900		\$ 139,300		\$ 169,200	
PRS						
SEG						
Total	\$ -		\$ -		\$ -	

### **Recovery of Incorrect BadgerCare and Medicaid Payments (DIN 5465)**

The Department requests \$256,000 PR in SFY07 to reflect the increase in revenues from allowing the Department to recover overpayments that result from a failure to report changes in non-financial criteria outside of the application and review period. The Department also requests statutory language changes to allow the Department to expedite the process of acquiring court orders so that recoveries can be made through the use of tax intercept.

Currently, the Department seeks recovery of incorrectly paid Medicaid or BadgerCare benefits if the incorrect payment resulted from 1) a misstatement or omission of fact at application or review; or 2) a failure to report the receipt of income or assets, during the benefit period, that would have affected eligibility. Recoveries made are deposited into the Medicaid and Food Stamps Fraud and Error Reduction PR appropriation. Of the total collected approximately 15% is returned to counties as incentive payments, 25% is retained by the state, and 60% is returned to the federal government. The state portion is used to fund the county program integrity and fraud investigation contracts.

Allowing the Department to recover for incorrectly paid Medicaid or BadgerCare benefits if an individual does not report a non-financial change that would have affected eligibility will ensure only eligible individuals are receiving Medicaid and BadgerCare benefits. Non-financial criteria include changes in residency, household composition and, in the case of BadgerCare, insurance coverage.

The Department also requests statutory changes to establish an expedited process to acquire court orders that authorize recoveries to be made through the use of tax intercept. Federal law requires that the Department obtain a court order authorizing the use of tax intercept. Current statutory provisions for obtaining a court order are administratively burdensome and it is not cost effective for counties to obtain a court order to seek repayments.

### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR						
FED						
PR	\$ -		\$ 256,000		\$ 256,000	
PRS						
SEG						
Total	\$ -		\$ 256,000		\$ 256,000	

### **Medicaid, BadgerCare and SeniorCare Pharmacy Reimbursement (DIN 5466)**

The Department requests a reduction of (\$7,272,000) GPR and (\$9,094,800) FED in SFY06 and (\$10,559,700) GPR and (\$13,880,400) FED in SFY07 to reflect the savings associated with reducing pharmacy reimbursement rates. This proposal consists of the following measures: (a) a reduction in pharmacy reimbursement for brand name drugs from the average wholesale price (AWP) minus 13% to AWP minus 16.0%, (b) the elimination of the SeniorCare 5% enhancement for brand name drugs, and (c) a reduction of the dispensing fee from \$4.38 to \$3.88 per prescription.

Currently, Wisconsin Medicaid reimburses AWP minus 13% for brand-name drugs. Brand name drugs prescribed under the SeniorCare program are reimbursed at the Medicaid rate plus 5%. However, two studies of Wisconsin pharmacy data and recent information indicate actual acquisition costs of name brand prescription drugs by pharmacies is between AWP minus 17.5% and AWP minus 21.5%. Pharmacies incur no additional costs associated with prescribing drugs under SeniorCare.

In addition to the reimbursement for the drug cost, pharmacies currently receive a dispensing fee of \$4.38 for most drugs. Wisconsin Medicaid's dispensing fee is higher than many other states and is higher than dispensing fees paid in the private market.

### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ (7,272,000)		\$ (10,559,700)		\$ (17,831,700)	
FED	\$ (9,094,800)		\$ (13,880,400)		\$ (22,975,200)	
PR						
PRS						
SEG						
Total	\$ (16,366,800)		\$ (24,440,100)		\$ (40,806,900)	

### **Third Party Liability (DIN 5467)**

The Department requests a reduction of (\$1,461,100) GPR and (\$2,028,900) FED in SFY06 and a reduction of (\$1,526,400) GPR and (\$2,063,600) FED in SFY07 to perform additional third party liability (TPL) identification and recovery activities that supplement the existing TPL activities of the Department.

Currently, the Department identifies third party liability coverage by matching the Medicaid eligibility file against 80 of the major insurance carriers in Wisconsin. Under this proposal the Department plans to contract with a vendor to perform additional TPL identification and recovery activities. A vendor will be able to access a broader base of insurance coverage including self-funded insurers. The contract would be on a contingency basis and only for new forms of insurance coverage identified that are not in the state system. In addition to the contingency fee, there will be state administration costs to identify the new matches for determining the contingency fee.

### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ (1,461,100)		\$ (1,526,400)		\$ (2,987,500)	
FED	\$ (2,028,900)		\$ (2,063,600)		\$ (4,092,500)	
PR						
PRS						
SEG						
Total	\$ (3,490,000)		\$ (3,590,000)		\$ (7,080,000)	

### **Medicaid Fraud Prevention (DIN 5469)**

The Department requests a reduction of (\$801,800) GPR and (\$1,098,200) FED in SFY06 and a reduction of (\$1,619,600) GPR and (\$2,180,400) FED in FY07 to reflect the implementation of additional fraud prevention activities.

Under this proposal the Department would contract on a contingency basis with a vendor to identify fraud and abuse in the Medicaid payment system. A vendor would enhance the Department's current fraud activities by using data systems to strategically identify fraud, ensure proper coding and billing of services, identify overpayments, and seek recoveries of overpayments.

#### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ (801,800)		\$ (1,619,600)		\$ (2,421,400)	
FED	\$ (1,098,200)		\$ (2,180,400)		\$ (3,278,600)	
PR						
PRS						
SEG						
Total	\$ (1,900,000)		\$ (3,800,000)		\$ (5,700,000)	

### **Managed Care for Low Income Families (DIN 5470)**

The Department requests a reduction of (\$1,453,900) GPR and (\$2,204,800) FED in FY06 and a reduction of (\$1,326,900) GPR and (\$1,983,300) FED in FY07 to reflect implementing efforts to increase managed care enrollment in Medicaid and BadgerCare by 5%.

The Department supports increased use of managed care in Medicaid and BadgerCare to achieve more effective coordination and delivery of care, better health outcomes, and more efficient use of resources. Under this proposal the Department will continue to promote managed care to Medicaid and BadgerCare recipients while also working with individual managed care organizations to increase their ability to expand the number of Medicaid and BadgerCare recipients they can serve.

#### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ (1,453,900)		\$ (1,326,900)		\$ (2,780,800)	
FED	\$ (2,204,800)		\$ (1,983,300)		\$ (4,188,100)	
PR						
PRS						
SEG						
Total	\$ (3,658,700)		\$ (3,310,200)		\$ (6,968,900)	

### **SSI Benefits and Administration Reestimate (DIN 5600)**

The Department requests an increase of \$1,486,700 PRS (federal TANF) in FY06 and an increase of \$322,500 PRS (federal TANF) in FY07 to fund projected SSI and Caretaker Supplement expenditures in the next biennium. This request is composed of a change in benefits of \$934,100 in FY06 and (\$174,000) in FY07; and a change in administrative costs of \$552,600 in FY06 and \$496,500 in FY07.

The State SSI Supplement program provides a cash benefit to low income elderly and disabled adults and disabled children. The Caretaker Supplement program provides a cash benefit to SSI recipients who have dependent children. The first \$128,281,600 of costs for the two programs are allocated to GPR funding, and the remainder is allocated to TANF funding. The requested funding for benefits is based on projected caseloads in the 2005-2007 biennium.

The Department is budgeted \$611,800 GPR, \$447,800 FED MA, and \$644,600 TANF in FY05 to administer SSI and Caretaker Supplement (CTS) benefits. These funds cover the costs of a contract with EDS, postage costs, and the Caretaker Supplement share of CARES and the Income Maintenance contract. Because of limited TANF funds the 2003-2005 biennial budget underfunded Caretaker Supplement CARES costs by \$471,000 TANF in FY04 and \$448,000 TANF in FY05. The Department reallocated one time underspending from other TANF programs in DHFS to fully fund the administrative costs in FY04. In addition, SSI and CTS administrative costs and the CTS share of CARES and the Income Maintenance contract will increase by \$104,600 TANF in FY06 and \$48,500 TANF in FY07. To fully fund SSI and CTS administrative costs, the Department is requesting \$552,600 TANF in FY06 and \$496,500 TANF in FY07.

#### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR						
FED						
PR						
PRS	\$ 1,486,700		\$ 322,500		\$ 1,809,200	
SEG						
Total	\$ 1,486,700		\$ 322,500		\$ 1,809,200	

### **Administration of SSI Program (DIN 5601)**

The Department requests an increase of \$6,000 PR and a reduction of (\$150,000) PRS in both years of the biennium, and statutory changes to improve the administration of benefit payments in the state SSI and Caretaker Supplement program. The funding reductions reflect TANF savings expected to result from the statutory changes.

The Department requests statutory changes to provide DHFS with explicit authority to promulgate rules to guide the administration of eligibility and benefit payment under the SSI and

Caretaker Supplement programs. These changes will strengthen the Department's ability to recoup overpayment of benefits, which will reduce benefit expenditures by (\$150,000) TANF per year in FY06 and FY07. The Department also requests statutory language authorizing the Department to promulgate rules to recoup benefits in all DHFS programs. The Department also requests statutory changes to include SSI and Caretaker Supplement among programs for which DHFS is required to investigate fraud and to update the fraud investigation statutes to be consistent with the current administrative structure between DHFS and DWD. Collections from these fraud investigations are expected to total \$50,000 PR per year. The Department requests an increase of \$6,000 PR in spending authority to fund the fraud investigations.

### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR						
FED						
PR	\$ 6,000		\$ 6,000		\$ 12,000	
PRS	\$ (150,000)		\$ (150,000)		\$ (300,000)	
SEG						
Total	\$ (144,000)		\$ (144,000)		\$ (288,000)	

### **Caregiver Investigations and Caregiver Background Check Fees (DIN 5602)**

The Department requests \$50,000 FED and \$50,000 PR in both years of the biennium to fund investigations of misconduct by caregivers employed by health care and long term care providers. The Department also requests a modification of s. 50.065(8) to allow caregiver investigations to be funded with caregiver background check fees. Investigations are performed by Department staff and by a private vendor. Because of staff reductions in the 2003-2005 biennium, the Department is contracting a greater number of cases with the private vendor. The funding increase is needed to fund the caregiver investigation contract at the projected level and avoid a backlog in the 2005-2007 biennium. There is sufficient caregiver background check fee revenue on an ongoing basis to support the \$50,000 PR in annual expenditures.

### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR						
FED	\$ 50,000		\$ 50,000		\$ 100,000	
PR	\$ 50,000		\$ 50,000		\$ 100,000	
PRS						
SEG						
Total	\$ 100,000		\$ 100,000		\$ 200,000	

### **Life Lease (DIN 5603)**

The Department requests a reduction of (\$258,100) GPR and (\$353,400) FED in FY06 and (\$711,300) GPR and (\$955,700) FED in FY07 and statutory language changes to implement Life Lease, an expansion of the CIP II waiver program for adults who are elderly or physically disabled. Under Life Lease, CIP II funding would be available to counties for all nursing home residents who wish to relocate to the community, without the requirement that the nursing home bed close. The Life Lease funding would be available for as long as the relocated individual uses community based long term care. Counties would no longer receive Life Lease funding for a person after the person dies or returns to a nursing home. Life Lease will generate cost savings to the MA budget because community care for relocated individuals is on average less expensive than institutional care.

As of July 2004, there were 492 elderly and physically disabled individuals in institutions who have expressed a desire to live in a community setting and were on waiting lists for community long term care programs. The Department projects that counties will be able to relocate 315 individuals from nursing homes to the community in the 2005-2007 biennium under Life Lease.

#### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ (258,100)		\$ (711,300)		\$ (969,400)	
FED	\$ (353,400)		\$ (955,700)		\$ (1,309,100)	
PR						
PRS						
SEG						
Total	\$ (611,500)		\$ (1,667,000)		\$ (2,278,500)	

### **Children's Long Term Support (DIN 5604)**

The Department requests a decrease of (\$150,600) GPR and an increase of \$101,900 FED in FY06 and an increase of \$150,600 GPR and \$506,900 FED to reflect the reallocation of \$225,000 GPR in both years of the biennium from the Life-Span Respite program to expand the children's long-term support program. Specifically, the children's long-term support program would utilize \$74,400 reallocated GPR and \$101,900 FED in FY06 and \$375,600 reallocated GPR and \$506,900 FED in FY07. This proposal has no net GPR effect. This funding would be used for 10 pilot site slots and 10 statewide crisis slots in FY06 and 35 pilot site slots and 25 statewide crisis slots in FY07. The children's long term support waivers are a federal Medical Assistance home and community based waiver program focused on the needs of children and their families. The children's long term support home and community-based waivers target children with physical, sensory, and developmental disabilities, and children with severe emotional disturbance. Currently, there are approximately 3,500 children waiting to receive services in at least one of the existing long-term care programs, including Family Support, the Community Options Program, and Medical Assistance waivers. This reallocation would expand the existing children's long-term support program by an estimated 80 children. The Life-Span



Respite funding is currently used to contract for the administration of the Life-Span Respite Program and to fund five regional pilot projects that build respite care infrastructure in their service areas. The funding can not be used for direct respite services.

### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ (150,600)		\$ 150,600		\$ -	
FED	\$ 101,900		\$ 506,900		\$ 608,800	
PR						
PRS						
SEG						
Total	\$ (48,700)		\$ 657,500		\$ 608,800	

### **Milwaukee County Mental Health Complex Funding (DIN 5607)**

The Department requests a decrease of (\$782,100) GPR and an increase of \$1,779,300 FED and \$416,900 SEG in FY06 and a decrease of (\$725,600) GPR and an increase of \$1,936,600 FED and \$413,900 SEG in FY07 to reflect that the Milwaukee County Mental Health Complex (MCMHC) will no longer be designated an institution for mental disease (IMD). Under federal law, nursing homes designated IMDs are ineligible for federal Medicaid reimbursement for residents aged 22 through 64. Nursing homes are designated IMDs if the Department has determined that a majority of residents in this age range have a mental illness and/or developmental disability and are in need of specialized services to treat their condition.

In FY04, the Department submitted a MA state plan amendment to add specialized psychiatric rehabilitative services as a MA benefit. Specialized psychiatric rehabilitative services are less intensive services of the type typically provided to individuals with mental illness in nursing homes. The Department has determined that the majority of non-elderly adults in the MCMHC are in need of these less intensive services, rather than specialized services, and, as a result, the facility should no longer be designated as an IMD.

After the re-designation, MCMHC will begin receiving MA reimbursement for all residents. To fund the additional MA benefit payments, this request would transfer to the Medicaid benefits budget \$1,750,300 GPR currently provided to MCMHC to fund care for non-elderly adults in the facility. The re-designation is expected to increase revenues to the facility by over \$1.6 million per year and will result in a GPR reduction of (\$782,100) GPR in FY06 and (\$752,600) GPR in FY07. The Department estimates that this request will generate additional SEG revenue of \$416,900 in FY06 and \$413,900 in FY07 through the nursing home IGT program.

### Fiscal Effect Summary

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ (782,100)		\$ (725,600)		\$ (1,507,700)	
FED	\$ 1,779,300		\$ 1,936,600		\$ 3,715,900	
PR						
PRS						
SEG	\$ 416,900		\$ 413,900		\$ 830,800	
Total	\$ 1,414,100		\$ 1,624,900		\$ 3,039,000	

### State Independent Living Council (DIN 5608)

The Department requests a decrease of (\$34,000) GPR, (\$306,100) PRS, and (1.5 PRS) FTE in both years of the biennium to reflect the establishment of the State Independent Living Council (SILC) as a non-profit corporation effective July 2005. The Council is currently attached to the Department.

The federal Rehabilitation Act requires all states to establish independent living councils. The federal Rehabilitation Services Administration (RSA) recently determined Wisconsin to be out of compliance with the Rehabilitation Act because SILC operates within a state agency. On August 5, 2004, Governor Doyle issued an executive order establishing the board as an independent non-profit corporation effective July 1, 2005 to comply with the Act.

The Department requests that \$34,000 GPR deleted from the DHFS budget be transferred to the Department of Workforce Development and allocated to the board on an ongoing basis. DWD will also allocate \$306,100 in federal vocational rehabilitation funds directly to the council annually. These actions will preserve the Council's total funding from the state at its current level.

### Fiscal Effect Summary

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ (34,000)		\$ (34,000)		\$ (68,000)	
FED						
PR						
PRS	\$ (306,100)	(1.50)	\$ (306,100)	(1.50)	\$ (612,200)	(1.50)
SEG						
Total	\$ (340,100)	(1.50)	\$ (340,100)	(1.50)	\$ (680,200)	(1.50)

### Mental Health and Substance Abuse Services for Child Welfare Families (DIN 5620)

The Department requests an increase of \$192,700 GPR and \$121,100 FED in FY06 and \$634,700 GPR and \$424,500 FED in FY07 to establish pilots in two small/medium counties for

mental health/AODA screening, assessment and treatment strategies for both children and parents entering the child welfare system. As a result of the recent federal Child and Family Services Review (CFSR) of the Wisconsin Child Welfare system, Wisconsin must develop a plan to have a system in place to assure the well-being of children, including assessing the mental health needs of children. A key concern identified in the CFSR was that children, particularly children in out-of-home placement, are not receiving mental health assessments even when the nature of the maltreatment, the dynamics of the family, and/or the family's and child's history indicate that a mental health assessment is warranted.

Failure to bring the state into compliance would result in the significant loss of federal revenue, continued costs and negative effects on children whose well-being is not being addressed. Strategies that prove successful in the pilots will be applied statewide to strengthen the child welfare system throughout the state.

### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ 192,700		\$ 634,700		\$ 827,400	
FED	\$ 121,100		\$ 424,500		\$ 545,600	
PR						
PRS						
SEG						
Total	\$ 313,800		\$ 1,059,200		\$ 1,373,000	

### **Community Opportunities and Recovery Waiver (Nursing Home Relocation Waiver for Persons with Serious Mental Illness) (DIN 5621)**

The Department requests a reduction of (\$29,900) GPR and (\$17,600) FED in FY06 and (\$163,500) GPR and (\$117,100) FED in FY07 to implement a new Medicaid 1915(c) Home and Community-Based Waiver program. The new Community Opportunities and Recovery (COR) waiver will be created for the purpose of relocating residents of nursing homes who have co-occurring mental health and physical health conditions into the community. The new waiver will include long-term support services and mental health community services specific to the needs of the person with a mental health diagnosis and condition that is severe, persistent and may require periods of intense supervision and support to remain safely in the community. This new waiver will also provide the community-based supports that better meet the Americans with Disabilities Act Title II goal, as applied in the Supreme Court *Olmstead* decision, which requires states to provide mental health treatment and long-term supports in the most integrated and least restrictive setting.

The Department intends to apply for a waiver to the federal government by the end of CY04. As part of this budget proposal, statutory language is being requested to direct the Department to implement the waiver within the limits of available federal, state, and county funds once approval from the federal Department of Health and Human Services is received.

### Fiscal Effect Summary

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ (29,900)		\$ (163,500)		\$ (193,400)	
FED	\$ (17,600)		\$ (117,100)		\$ (134,700)	
PR						
PRS						
SEG						
Total	\$ (47,500)		\$ (280,600)		\$ (328,100)	

### PATH Program Transfer to Department of Commerce (DIN 5622)

The Department requests the reduction of (\$45,000) GPR, (\$640,000) FED and (1.0) FED FTE in both years of the biennium to transfer the Projects for Assistance in Transition from Homelessness (PATH) program from DHFS to the Department of Commerce. The PATH program is a federal block grant that provides outreach and intervention services to individuals who are homeless and have serious mental illness or co-occurring disorders of mental illness and substance abuse. The Department is proposing to transfer the PATH program to Commerce to integrate it more closely with the other nursing and homeless programs currently administered by Commerce, resulting in more comprehensive and better-coordinated services to clients.

### Fiscal Effect Summary

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ (45,000)		\$ (45,000)		\$ (90,000)	
FED	\$ (640,000)	(1.00)	\$ (640,000)	(1.00)	\$ (1,280,000)	(1.00)
PR						
PRS						
SEG						
Total	\$ (685,000)	(1.00)	\$ (685,000)	(1.00)	\$ (1,370,000)	(1.00)

### Female Offender Re-Integration Program (DIN 5623)

The Department requests \$121,500 GPR in FY06 and \$162,300 in FY07 to fund components of the Female Offender Re-Integration Program. The program will be funded primarily with federal funding received by DHFS under the Access to Recovery grant and the Substance Abuse Block Grant. The GPR request will fund assessment and treatment for women who are not eligible for services under federal funding criteria.

This enhanced community transition program for female offenders with children will focus on developing a comprehensive pre-release plan that addresses all critical factors needed for an enhanced probability of success in the community upon release. The program will target

women with children who have committed non-violent crimes and who will be released from prison in southeastern Wisconsin. The goals of the program are safely reuniting children with their mothers and breaking the inter-generational cycle of incarceration. Assessment and treatment for both children and mothers will begin up to six months prior to the mother's release from prison, and, where appropriate, resources will be made available for visitations between mothers and children to assist the family in developing a safe, nurturing relationship that will continue when mothers and children are reunited in the community.

### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ 121,500		\$ 162,300		\$ 283,800	
FED						
PR						
PRS						
SEG						
Total	\$ 121,500		\$ 162,300		\$ 283,800	

### **Administrative Transfers (DIN 5801)**

The Department requests an increase of \$2,252,500 FED and a reduction of (\$1,697,100) PR and (\$213,200) PRS in FY06 and an increase of \$2,251,900 FED and a reduction of (\$1,697,000) PR and (\$213,200) PRS in FY07. The Department also requests an increase of 7.50 GPR FTE and 21.0 FED FTE and a reduction of (26.01) PR FTE and (2.57) PRS FTE in both years of the biennium. This is the net effect of formalizing internal transfers of positions in the 03-05 biennium and corrections due to technical errors in file maintenance.

### **Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR	\$ -	7.50	\$ -	7.50	\$ -	7.50
FED	\$ 2,252,500	21.00	\$ 2,251,900	21.00	\$ 4,504,400	21.00
PR	\$ (1,697,100)	(26.01)	\$ (1,697,000)	(26.01)	\$ (3,394,100)	(26.01)
PRS	\$ (213,200)	(2.57)	\$ (213,200)	(2.57)	\$ (426,400)	(2.57)
SEG						
Total	\$ 342,200	(0.08)	\$ 341,700	(0.08)	\$ 683,900	(0.08)

**PR/FED/SEG Position Cuts  
(DIN 5802)**

The Department requests the reduction of PR, FED and SEG position and expenditure authority due to projected decreases in revenue that will result in insufficient funding to sustain the positions.

**Fiscal Effect Summary**

Source of Funds	FY 2006		FY 2007		Biennial Total	
	Dollars	FTE	Dollars	FTE	Dollars	FTE
GPR						
FED	\$ (1,019,200)	(14.70)	\$ (1,121,300)	(15.70)	\$ (2,140,500)	(15.70)
PR	\$ (83,900)	(2.25)	\$ (83,900)	(2.25)	\$ (167,800)	(2.25)
PRS	\$ (299,400)	(2.20)	\$ (299,400)	(2.20)	\$ (598,800)	(2.20)
SEG	\$ (52,400)	(0.57)	\$ (52,400)	(0.57)	\$ (104,800)	(0.57)
Total	\$ (1,454,900)	(19.72)	\$ (1,557,000)	(20.72)	\$ (3,011,900)	(20.72)

## SUMMARY OF STATUTORY LANGUAGE REQUESTS SUBMITTED BY DHFS

### *Statutory Language Requests Related to DINS*

#### **Division of Public Health**

Dental Grants (DIN 5103): Provide the Department the authority to use funding in s.20.435(5)(de) for grants to technical colleges for dental care for low-income children and increase the amount of funding for a school-based dental sealant program from \$60,000 to \$120,000. (s.250.10)

Transfer of Bureau of Health Information and Policy (DIN 5105): Amend the appropriation structure to reflect the transfer of the Bureau of Health Information and Policy from the Division of Health Care Financing to the Division of Public Health (DPH) as part of an overall restructuring of DPH. (s.20.435(4)(hg), (hi), and (gm))

Home Visiting Services (DIN 5106): Expand the current targeted home visiting services program and initiate a new, universal home visiting program. (s.20.435(30)(de), s.46.515)

Tanning Facilities (DIN 5107): Repeal the Department's authority to regulate and issue permits to tanning facilities. (s.255.08)

Sanitarian Registration (DIN 5108): Transfer the authority to register Sanitarians from DHFS to the Department of Regulation and Licensing. (s.250.05)

Lead Registry (DIN 5109): Restructure the Lead Registry by: eliminating the mandatory component of the state Registry, strengthening the requirement for local public health departments to issue an order that requires reduction or elimination of an imminent lead hazard when lead hazards are present, and eliminating certificates of lead safe status with a duration of less than 12 months. (Chapter 254)

Food Distribution Program (DIN 5801): amend the appropriation structure to reflect the internal transfer of the Food Distribution Program from the Division of Children and Family Services to the Division of Public Health. (s.20.435(3)(dn))

#### **Division of Children and Family Services**

Community Aids (DIN 5301): Consolidate all Substance Abuse Prevention and Treatment (SAPT) Community Aids funding in one appropriation. (s. 46.40(1)(a))

Program Enhancement Plan (DIN 5303): Create a new appropriation to fund the Child Welfare Program Enhancement Plan. (s. 20.435(3)(cx))

WiSACWIS Confidentiality (DIN 5305): Allow the Department of Health and Family Services, a county department of social services, a licensed child welfare agency, or a licensed day care center to enter confidential information into the statewide automated child welfare information system (WiSACWIS) and to access the information maintained in WiSACWIS if that information is necessary for the organization to perform its duties

or coordinate the delivery of services to a client under the Children's Code, the Juvenile Justice Code, or the Mental Health Act. (s.48.78(2)(a))

Domestic Abuse Program Funding (DIN 5308): Provide flexibility to the Department in its distribution of domestic abuse grants. (s.46.95 (2)(f))

Child Care Development Funds (DIN 3003 and 4503): Revise the amount of federal Child Care Development Funds transferred from Department of Workforce Development to DHFS to conform to the Department's budget proposal (s.49.155(1g)(c))

TANF Funding (DINs 5302, 5305, 5307, 5410, 5600 and 5601): Update the amounts of TANF funding to be provided by the Department of Workforce Development to DHFS to reflect the Department's request. (s.49.175(1)(2e))

### **Division of Health Care Financing**

Eligibility Quality Assurance (DIN 5410): Provide the Department the authority to require third parties such as employers and banks to provide information needed to determine eligibility and benefits for Income Maintenance program recipients.

MA Transportation (DIN 5411): Provide the Department the authority to contract with a transportation broker to provide transportation services for MA recipients. (s.49.46(2)(b)3).

MA Mental Health/Substance Abuse Services (DIN 5413): To be consistent with federal regulations, provide that a prescription for mental health and substance abuse services for MA recipients can be authorized not only by a physician, but also by a licensed practitioner of the healing arts, within the scope of practice under state law. (s.49.46(2)(b)6f,fm,k,L,Lm)

MA Coverage for Youths Leaving Out-of-Home Care (DIN 5421): Expand MA eligibility to youths up to age 21, who have been in out-of-home care for at least a year, age out of the foster care system and are not otherwise eligible for MA. (s.49.46(1)(a)5.)

Prenatal Care (DIN 5422): Expand prenatal care services under BadgerCare to women who are not eligible for full MA services, but whose children, if born, would be eligible for BadgerCare benefits. In Wisconsin, these women would include low-income, pregnant, non-qualifying immigrants who currently only qualify for emergency MA services. (s.49.665(1)(b))

HIRSP Eligibility for Individuals receiving Limited MA Benefits (DIN 5441): Allow individuals who qualify for limited MA benefits and SeniorCare to be able to participate in the HIRSP program if they meet the other HIRSP eligibility criteria; prohibit individuals eligible for BadgerCare, COP waiver, CIP-II, CIP-I, Brain Injury Waiver, and Children Long Term Support Waivers to become HIRSP eligible; and allow individuals on COP regular to be HIRSP eligible only if they do not receive traditional Medical Assistance benefits. (s. 149.10(6) and 149.12(2)(f))



HIRSP Pharmacy Drug Coverage Reform (DIN 5442): Remove the requirement that HIRSP must have the same payment rates as Medicaid and allow the Department, with the approval of the Board, to set the drug reimbursement rates for HIRSP. (s.149.14(5)(e) and 149.142(1)(b))

HIRSP Medicare Plan 2 Deductible (DIN 5443): Require that the maximum medical out-of-pocket costs for individuals eligible for Medicare shall be equal to Medicare Part A deductible in the year that the Plan 2 rates are established. (s.149.14(5)(a), 5(c))

Funeral, Burial and Cemetery Aids Program Funding (DIN 5451): Reduce the county reimbursement for funerals and burials from \$1,500 to \$1,150 and reduce cemetery reimbursements from \$1,000 to \$750 to contain expenditures within the base funding level for funeral and cemetery aids and establish a separate budget appropriation for the program. (s.49.785(1)(a), 1(b), and 20.435(4)(bn))

Medical Assistance Purchase Plan Premium Change (DIN 5462): Increase the premium from 3% to 5% of earned income for recipients above 150 percent of poverty effective January 1, 2006 to mirror the premium structure in BadgerCare. (s.49.472(4)(a))

Spousal Support for Institutionalized Persons (DIN 5463): Clarify the conditions under which a community spouse is required to contribute toward the cost of care for an institutionalized spouse. (s.49.90)

Recovery of Incorrect BadgerCare/MA Payments (DIN 5465): Allow the Department to recover overpayments that result from a failure to report changes in non-financial criteria outside of the application and review period and to submit an uncontested order for a recovery to the circuit court and provide that the court shall, without notice, render a judgement in accordance with the order. (s.49.497(1))

Pharmacy Reimbursement (DIN 5466): Eliminate the provision that sets reimbursement for brand name drugs prescribed under the SeniorCare program at the Medicaid rate plus 5%. (s.49.688(1)(e))

### **Division of Disability and Elder Services**

Administration of SSI Program (DIN 5601): Provide the Department specific statutory authority to promulgate rules to guide the administration of eligibility and benefit payment under the SSI and Caretaker Supplement programs and to recoup benefits in all DHFS programs, including SSI and Caretaker Supplement. Provide the Department the authority to investigate fraud for the SSI and Caretaker Supplement programs. (s.49.77, s.49.775, and s.49.197)

Caregiver Investigations and Caregiver Background Check Fees (DIN 5602): Allow caregiver fee revenues to fund caregiver investigations by DHFS. (s.50.065(8))

Life Lease (DIN 5603): Allow the Department to establish an “enhanced” CIP II rate for nursing home relocations that is higher than the rate budgeted for existing slots, similar to the Department’s authority to establish enhanced rates in the CIP IB program. (s.46.277)

Life-Span Respite (DIN 5604): Eliminate the Life-Span Respite Program because the funding is being reallocated to the children's long-term support program. (s.46.986)

Community Programs (DINS 5620 and 5623): To reflect the Department's budget request, add two new community programs to be funded and administered by the Department: Mental Health Treatment and Services for families in the child welfare system and Female Offender Re-Integration Program. (s.46.48)

Community Opportunities and Recovery Waiver (DIN 5621): Establish a new MA home and community-based waiver for individuals who have co-occurring mental health and physical health conditions.

## ***Statutory Language Requests Not Related to DINS***

### **Division of Public Health**

HIV/AIDS Program Technical Correction: Correct the appropriation reference. (s.49.686(2))

Wisconsin Well-Woman Program: Provide the Well-Woman Program the authority to pay for case management services and revise eligibility to conform to federal regulations on income limits and co-payment requirements. (s.255.06(2))

Emergency Medical Services Funding: Make the following changes: allow the Department to give funds for emergency medical technician (EMT) training to ambulance service providers; provide that the Emergency Medical Services (EMS) Board recommend the formula to be used to distribute training funds to ambulance providers; and require ambulance service providers to file expenditure reports for training funds. (s.20.435(5)(ch), s.146.55(5), and s.146.58(7))

Amend s. 20.435 (1)(kx): Eliminate obsolete, inaccurate statutory language. (s. 20.435 (1)(kx))

### **Division of Children and Family Services**

Subsidized Guardianship Program: Provide the Department the authority to implement a subsidized guardianship program consistent with its federal IV-E waiver.

### **Division of Health Care Financing**

Second Opinion for MA Surgery: Eliminate the requirement for a second opinion for certain elective surgical procedures for MA reimbursement. (s.49.45(3)(i))

Physician's Order for Personal Care: Remove the requirement for a physician's order for personal care services for Medicaid reimbursement and allow the Department to regulate the provision of these services through administrative rule. (s.49.46(2)(b)(6j))

Social Security Number Exemption: Exempt from the requirement to provide social security numbers for MA and BadgerCare eligibility individuals belonging to religious sects that object to having a social security number. (s.49.82(2))

Child Support Cooperation for Food Stamps: Allow individuals to be eligible for Food Stamps regardless of the status of their child support cooperation. (s.49.79(2)(a))

Definition of Income Maintenance: Update the definition of Income Maintenance to include Family Care, SSI Caretaker support program, and Fraud and Error Reduction activities related to IM programs. (s.49.78(1)(b))

HIRSP Case Management: Eliminate the requirement that the Department implement a community-based case management pilot program. (s.149.25)

HIRSP Deductible Subsidies: Correct the formula for the calculation of premiums to eliminate double counting of deductible subsidies. (s.149.143(2)(a) and s.149.144)

HIRSP Administrative Rules: Eliminate the requirement that the Department set HIRSP premium rates, insurer assessments, and provider contribution by administrative rule every plan year. (s.149.143(2)(a)2-4)

HIRSP Provider Certification: Eliminate the requirement that a HIRSP provider must be Wisconsin Medicaid certified. (s.149.14(3))

BadgerCare Pharmacy Reform: Direct the Department to submit a waiver to the federal government to allow the BadgerCare pharmacy program to have a tiered co-payment structure.

### **Division of Disability and Elder Services**

DDES Appropriation Structure Changes: Make changes in the appropriation structure to reflect the Department's current organization. (s.20.435(2),(6),(7))

MHI Deficit Reporting: Eliminate the requirement that the Department submit reports on the Mental Health Institute (MHI) deficit reduction plan on the grounds that they are obsolete because the MHIs are no longer in an unsupported cash deficit. (s.51.05(3g) and (3m))

Mendota Juvenile Treatment Center (MJTC) Rates: Update statutes to reflect projected costs charged to the Department of Corrections for MJTC in the 05-07 biennium. (s.46.057(2))

Concurrent Criminal and Mental Health Commitments: Provide that the treatment of individuals with concurrent criminal and s.971.17 commitments will conform to the provisions of the DHFS/Department of Corrections Memorandum of Understanding. Require that sexually violent persons committed to DHFS under Chapter 980 would serve any subsequent criminal sentence in the state correctional system or county jail. (s.971.17, s.973.15, s.980)

System Change Grants: Eliminate the requirement that the Department *must* change recipients of System Change Grant funding every three years. (s.46.52)

Integrated Services Program: Correct the appropriation reference. (s.46.485 (2g))

State Centers Utilization Review Chargeback: Update the statutes to refer to the current CIP IA rate. (s.51.437(4m)(c)2b)

Family Care Phase-In for Non-MA Eligible Persons: Extend to June 2008 the deadline for the establishment of the Family Care benefit on an entitlement basis for non-MA persons who are functionally eligible for Family Care. (s.46.286(3)(d))

Combine Community Integration Program Funding: Provide the flexibility to counties to use unexpended funds from CIP 1A in the CIP IB program, to help meet the county's needs to serve CIP IB-eligible individuals with developmental disabilities. (s.46.275(5)(c))

DD Waiver Funds for New Construction Home Modifications: To conform to federal requirements, allow waiver funds under CIP 1A, CIP 1B, Brain Injury, and Children's Long Term Support waivers to pay for new construction if done as part of an approved home modification. (s.46.275(5)(b)(1))

ICF-MR Restructuring: Allow the Department to create a flexible pool of funding from county funding under the ICF-MR Restructuring Initiative that would be used to assist counties in funding unanticipated costs related with relocating or diverting an individual from an ICF-MR. (s.49.45(30m))

ICF-MR Restructuring Shield Law: Allow for placements in an ICF-MR if providing community-based care would not be feasible within the limits of available state and federal funding and required county matching funds. (s. 46.279)

Exception for Family Care Counties for Institutional Cost Liability: Exempt Family Care counties that provide services to adults with developmental disabilities from the financial responsibility for the institutional costs of care for MA recipients who are not enrolled in Family Care. (s.49.45(30m))

Adult Protective Services: Provide the Department the flexibility to use guardianship grant funding for adult protective services as well. (s.46.977, s.20.435(7)(cg))

Definition of Licensed Adult Family Home: Redefine Adult Family Homes by operating model (corporate versus traditional) rather than by size. (s.50.01(1) and s.50.033)

CBRF Pre-Admission Assessment: Delete provision that makes a CBRF resident ineligible for COP, COP-Waiver, and CIP II funding if he or she fails to undergo the pre-admission assessment or consultation; delete requirements on CBRFs to notify applicants of the pre-admission requirement and to complete "statement of financial condition" forms for new residents; and as a condition of licensure, require CBRFs to distribute a DHFS or county brochure to all prospective residents with information about long term care programs (s.46.27 and s.50.035(7))

## **PROGRAM NARRATIVES**

### **Division of Public Health (Programs 1 and 5)**

The Division of Public Health works with public and private health agencies and care providers to protect health and life, prevent disease and disability, promote healthy behavior, and ensure the provision of accessible and adequate health care. It is responsible for programs in the areas of environmental health, occupational health, family and community health, emergency health services and injury prevention, chronic diseases, communicable diseases, and health promotion. It is responsible for preparing, collecting, analyzing, and disseminating health care information.

### **Division of Children and Family Services (Program 3)**

The Division of Children and Family Services provides funding, direct services, community development services, and leadership in the development of policy for child welfare, adoption and family service programs. Funding to support these initiatives is provided through local and county agencies. The DCFS sets standards through administrative rule-making for this array of programs. In addition, the Division licenses and regulates child welfare programs, day care providers, and out-of-home care providers throughout the state. The Division is also responsible for directing and overseeing the state's assumption of responsibility for Milwaukee County's Child Protective Services System.

### **Division of Health Care Financing (Program 4)**

The Division of Health Care Financing is responsible for purchasing quality health care services, determining eligibility for publicly-funded health care and food assistance programs, controlling health care costs in publicly-funded programs, expanding managed care programs, and managing the delivery of Food Stamps benefits. The Division of Health Care Financing administers the state's Medical Assistance program, BadgerCare program, SeniorCare program, the Health Insurance Risk Sharing Plan (HIRSP), and Food Stamps program.

### **Division of Disability and Elder Services (Programs 2, 6 and 7)**

The Division of Disability and Elder Services provides funding and services, primarily through grantees and local agencies, to persons with developmental disabilities, mental illness, substance abuse problems, physical disabilities, and sensory disabilities. It also provides services to the elderly, particularly those who experience chronic conditions associated with aging. In addition, the Division licenses and certifies health and community care providers and facilities and long-term support programs for the above populations. In addition to community-based programs, the Disability and Elder Services Division administers the state's institutional programs for persons whose mental and physical needs cannot be met in a community setting, including those who have developmental disabilities, mental illness, or alcohol or other substance abuse issues. The institutions provide medical, psychological, social, and rehabilitative services. The Division also operates the Wisconsin Resource Center which serves mentally ill inmates whose treatment needs cannot be met in the traditional prison setting and the Sand Ridge Treatment Center which services individuals who are being detained or have been committed as sexually violent persons.

## **General Administration (Program 8)**

### *Division of Management and Technology*

The Division of Management and Technology provides personnel, financial, information technology and other administrative services to the program divisions of the Department of Health and Family Services, in order to support the divisions in delivering quality, cost-effective programs for the Department's clients. In addition, the Division assists the Department Secretary in effectively managing the agency by establishing and overseeing administrative policies and procedures, providing financial, technology and personnel advice, and ensuring compliance with laws, regulations, and standards.

### *Office of the Secretary and Units Reporting to the Office of the Secretary*

The Office of the Secretary is responsible for the overall direction and operation of the Department of Health and Family Services. It receives direction from the Governor and the Legislature, and provides services through the five Divisions of the Department. The immediate Office of the Secretary consists of the Secretary, Deputy Secretary, Executive Assistant, and support staff. The support staff provide administrative support services, and provide for the analysis and monitoring of selected program and management issues. In addition, Public Information, Legislative Liaison, and Constituent Relations staff provide assistance directly to the Office of the Secretary. Other units that report to the Office of the Secretary are the Office of Legal Counsel and the Office of Strategic Finance. The Office of Strategic Finance has responsibility for the Department's budget, evaluation, audit, strategic planning, area administration, and tribal affairs functions.

## PRIORITY LISTING OF DINS

The Department of Health and Family Services biennial budget supports the following priorities of the Governor.

- I. Care for Wisconsin's Kids: In his KidsFirst plan the Governor stated "the Administration's highest priority should be making sure our children grow up safe, healthy, and successful." As stated in the Governor's major budget policies, "implementing the Governor's KidsFirst Initiative will be the Governor's top priority in the 2005-07 budget." The Department's biennial budget implements KidsFirst items and invests in children and families in the following DINS.

- 5102 Expanding Dental Services through Technical Colleges
- 5103 Seal-A-Smile Expansion
- 5104 Parental Access to Immunization Registry
- 5106 Family Foundations
- 5302 Milwaukee Child Welfare Reestimate
- 5303 Child Welfare Program Enhancement Plan
- 5304 Foster Care Rate Increase
- 5305 WiSACWIS Reestimate
- 5306 State Foster Care and Adoption Assistance Reestimate
- 5307 Kinship Care Reestimate
- 5308 Funding for Domestic Abuse Grant Program
- 5421 MA Coverage for Youths Leaving Out-of-Home Care
- 5422 Prenatal Care for Non-qualified Immigrant Women
- 5623 Female Offender Re-Integration Program

- II. Health Care: As stated in the Governor's major budget policies, preserving health care access for Wisconsin's seniors, disabled individuals and low-income families; containing costs; addressing federal mandates; and streamlining the health care delivery system will be priorities in the 2005-07 budget. The Department's biennial budget supports these health care goals in the following DINS.

- 5400 MA Base Reestimate
- 5401 BadgerCare Reestimate
- 5402 SeniorCare Reestimate
- 5403 MA Contracts Reestimate
- 5404 Disease Aids Reestimate
- 5405 HIRSP Reestimate
- 5410 Eligibility Quality Assurance
- 5411 Transportation Broker
- 5412 Emergency Room Utilization
- 5413 Eliminate Physician Prescription Requirement for MH Services
- 5420 Expansion of SSI Managed Care
- 5441 HIRSP Eligibility of Individuals Receiving Limited MA Benefits
- 5442 HIRSP Pharmacy Reform
- 5443 HIRSP Plan 2 Deductible
- 5460 Changing the Medicaid 'Grace Month' Policy
- 5462 Medical Assistance Purchase Plan Premium Change
- 5463 Spousal Support for Individuals Receiving Long Term Care Services
- 5464 Estate Recovery for the PACE and Partnership Programs



- 5465 Recovery of Incorrect BadgerCare and Medicaid Payments
- 5466 Medicaid, BadgerCare, and SeniorCare Pharmacy Reimbursement
- 5467 Third Party Liability
- 5469 Medicaid Fraud Prevention
- 5470 Managed Care for Low-Income Families
- 5600 SSI Benefits and Administration Reestimate
- 5601 Administration of SSI Program
- 5602 Caregiver Investigations and Caregiver Background Check Fees
- 5603 Life Lease
- 5604 Children's Long-Term Support
- 5620 Mental Health and Substance Abuse Services for Child Welfare Families
- 5621 Community Opportunities and Recovery Waiver
- 5607 Milwaukee County Mental Health Complex Funding
- 5200 Institute Split
- 5201 Sexually Violent Persons Program Reestimate
- 5204 CIP 1A Reestimate

- III. Secure Fair Share of Federal Dollars: As stated in the Governor's major budget policies, "the state has a goal of increasing the receipt of federal funds where consistent with state program goals." The following budget DINs implement federal revenue maximization initiatives.

- 5202 Mental Health Institutions Physician Services Billing
- 5461 Medical Assistance Services for Children in RCCs

- IV. Support Local Government: As stated in the Governor's major budget policies, "local government services are critical to Wisconsin's citizens." The following budget DINs help preserve funding to local government.

- 5301 Community Aids
- 5451 Cemetery, Funeral, and Burial Aids Program

- V. Streamline State Government: As stated in the Governor's major budget policies, the 2005-07 budget will continue to downsize and streamline state government through co-location of government services, elimination of low priority programs, and other mechanisms. The following DINs achieve efficiencies in state government.

- 5101 OSHA Transfer to UW Laboratory of Hygiene
- 5105 Transfer Bureau of Health Information and Policy
- 5107 Repeal Tanning Regulation
- 5108 Transfer Sanitarian Registration
- 5109 Lead Registry Modifications
- 5110 Groundwater Program Reestimate
- 5203 Shared Services
- 5801 Administrative Transfers
- 5802 PR/FED/SEG Position Cuts

# Department of Health and Family Services

September 2004

Northeastern Regional Office

Northern Regional Office

Southeastern Regional Office

Southern Regional Office

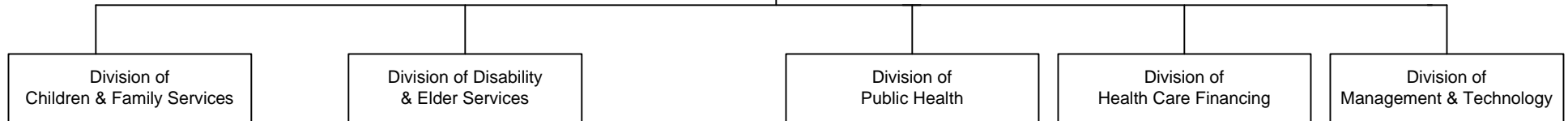
Western Regional Office

Secretary  
Deputy Secretary  
Executive Assistant

Assistant to the Secretary  
Office Support  
Constituent Relations  
Public Information  
Legislative Liaison

Office of Strategic Finance

Office of Legal Counsel



Adol Preg Prevention  
Adoptions  
Adoption Search  
Child Abuse & Neglect  
Child Caring Institutions  
Coordinated Services Team Initiative  
Domestic Abuse  
Family Preserv & Support  
Foster Care  
Migrant/Hispanic Svcs  
Regulation of Day Care  
Programs, Group Foster  
Homes, CCIs and Child  
Welfare Programs  
Runaway Programs  
Teen Parent Init & Svc  
Youth AODA Prevention  
Youth Indep Living

Adult Day Care  
Alzheimers Family Caregivers Support  
Birth-Three Program and Council  
Brain Injury Waiver Program  
Caregiver Background Check Program  
Certification of Mental Health & AODA Programs  
Children's Long-Term Care Waiver Program  
Community Integration Program  
Community Options Program  
Community Support Programs for  
Children w/Severe Mental Illness  
Coordinated Service Team Initiative  
Developmental Disabilities  
Elder Abuse  
Elderly/Senior Programs  
Family Care Program  
Family Support Program  
Governor's Council on People w/Disabilities  
Human Services Reporting System  
Integrated Service Programs for  
Children w/Severe Emotional Disturbances  
Intoxicated Driver Program  
Katie Beckett Program  
Mental Hlth/AODA Redesign  
Mental Health and Council  
Nurses Aide Training Registry  
PACE Program  
Partnership Program  
Pathways to Independence  
Regulation of Adult Family Homes, CBRFs  
Adult Day Care & Res. Care Apartment Complexes  
Regulation of Hospitals, Laboratories, etc.  
Regulation of Nursing Homes  
Services for the Blind & Visually Impaired & Council  
Services for the Deaf & Hard of Hearing & Council  
Services for Persons w/Physical Disabilities  
& Council  
State Independent Living Council  
State SSI, Caregiver Supplement, SSI-E Program  
Substance Abuse, Addiction & Council  
Wisconsin Council on Developmental Disabilities

Centers for the Developmentally Disabled  
Community Consultation  
Community Placements  
Conditional/Supervised Release  
Forensic Services  
Institution Food Service Mgmt  
Mental Health Institutes  
Patient Rights & Grievances  
Sand Ridge Secure Treatment Center

AIDS/HIV/STD Programs  
Air Quality  
Chronic Disease Prevention  
Communicable Disease  
Surveillance and Prevention  
Comprehensive School Health  
Disaster/Emergency Response  
Environmental Health  
Family Health  
Fish Consumption Advice  
Groundwater Standards  
Health Hazard Evaluation  
Health Information  
Health Professional Shortage Areas  
Health Promotion  
Health Services Utilization Data  
Immunizations/Vaccines  
Infant Screening  
Injury Prevention  
Licensing/Certification/Registration:  
Emergency Medical Services;  
Restaurants; Hotels/Motels; Bed & Breakfast  
Homes; Dairy Operations; Campgrounds;  
Public Swimming Pools/Whirlpools;  
Tattoo/Body Piercing;  
Lead/Asbestos Abatement;  
Tanning Beds; X-ray Equipment  
Minority Health  
Nutrition Information  
Occupational Health  
Oral Health  
Population Health Data  
Primary Care  
Public Health Epidemiology  
Public Health Nursing  
Radiation Protection Programs  
Reproductive Health  
Rural Health  
Sexual Assault Prevention  
Synar (Youth Tobacco) WI Wins  
Tobacco Education  
Vital Records & Statistics  
Women's Health  
Women, Infants, Children (WIC)  
Supplemental Food Program

BadgerCare  
Children Come First  
Chronic Renal Disease  
Coordination of Benefits  
Decision Support System  
Disability Determinations  
Disability Hearings  
Eligibility Policy and Waivers  
Estate Recovery  
Fee-for-Service Benefits Policy &  
Reimbursement  
Fiscal Agent Liaison & Monitoring  
Food Stamp & Eligibility Outreach  
Food Stamp Program  
General Relief  
HIRSP  
Hospital Rate Setting  
Managed Care Programs  
Medical Assistance  
Medical Policy  
Milwaukee Wrap Around  
Nursing Home Reimbursement  
Prior Authorization  
Provider Audits  
Provider Certification  
Quality Assurance  
Recipient Lock-In  
Senior Care Prescription Program  
Social Security & SSI Disability Determination  
SSI HMO Program  
SSI Medicaid Eligibility  
State Data Exchange  
Wisconsin Medicaid Program

Accounting  
Affirmative Action/Civil Rights Compliance  
Business Process Management  
Collections  
Employee Assistance  
Disability Determinations  
Employment Relations  
Engineering  
Health and Safety  
Information Systems  
Office Space  
Payroll & Benefits  
Personnel  
Purchasing  
Records & Forms Mgmt  
Telecommunications  
Training & Development  
Wisconsin Environmental Protection Act  
(WEPA) Coordination